


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000153024**


1. Entity Name  
**DAN DEY ARMIN MOBILE AUTO, INC.**



Principal Place of Business  
**36330 HENDERSON LANE  
 ZEPHYRHILLS, FL 33541**

Mailing Address  
**36330 HENDERSON LANE  
 ZEPHYRHILLS, FL 33541**

**DO NOT WRITE IN THIS SPACE**



01222008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-0493688</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**DAJ ARMIN, DAN  
 36330 HENDERSON LN  
 ZEPHYRHILLS, FL 33542**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Dan DeJ Armin* DATE: *1-29-08*

Signature, typed or printed name of registered agent and title, applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DEY ARMIN, DAN 36330 HENDERSON LANE ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DEY ARMIN, JOAN 36330 HENDERSON LANE ZEPHYRHILLS, FL 33541
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000803585  
 02/07/08-80055-014-150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dan DeJ Armin* DATE: *1-29-08* PHONE: *7813-7837769*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #