

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079613

FILED
Jul 05, 2006
Secretary of State

Entity Name: AMERICAN VAN LINES EAST, INC.

Current Principal Place of Business:

11105 INDIAN OAKS DR
TAMPA, FL 33624

New Principal Place of Business:

9507 N TRASK ST
TAMPA, FL 33624

Current Mailing Address:

11105 INDIAN OAKS DR
TAMPA, FL 33624

New Mailing Address:

9507 N TRASK ST
TAMPA, FL 33624

FEI Number: 54-2153039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AFIK, ORIT
11105 INDIAN OAKS DR
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AFIK, ORIT
Address: P O BOX 340895
City-St-Zip: TAMPA, FL 33694

Title: D () Delete
Name: AFIK, TOMER
Address: P O BOX 340895
City-St-Zip: TAMPA, F; 33694

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AFIK, ORIT
Address: 9507 N TRASK ST
City-St-Zip: TAMPA, FL 33624

Title: D (X) Change () Addition
Name: AFIK, TOMER
Address: 9507 N TRASK ST
City-St-Zip: TAMPA, F; 33624

Title: D () Change (X) Addition
Name: AFIK, MAOZ
Address: 9507 N TRASK ST
City-St-Zip: TAMPA, FL 33624

Title: D () Change (X) Addition
Name: AFIK, ORLY
Address: 9507 N TRASK ST
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORIT AFIK

D

07/05/2006

Electronic Signature of Signing Officer or Director

Date