

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079613

FILED
Feb 02, 2009
Secretary of State

Entity Name: AMERICAN VAN LINES EAST, INC.

Current Principal Place of Business:

9524 NORTH TRASK ST.
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

9524 NORTH TRASK ST.
TAMPA, FL 33624

New Mailing Address:

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
9507 N TRASK ST
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

AFIK, ORIT
9524 N TRASK ST
TAMPA, FL 33624 US

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: ORIT AFIK

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AFIK, ORIT
Address: 9524 NORTH TRASK ST.
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: AFIK, TOMER
Address: 9524 NORTH TRASK ST.
City-St-Zip: TAMPA, FL 33624

Title: D (X) Delete
Name: AFIK, MAOZ
Address: 9524 NORTH TRASK ST.
City-St-Zip: TAMPA, FL 33624

Title: D (X) Delete
Name: AFIK, ORLY
Address: 9524 NORTH TRASK ST.
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

02/02/2009

Electronic Signature of Signing Officer or Director

Date