

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085370

Entity Name: AUTOKLIN MOTORS, INC.

FILED  
Mar 16, 2008  
Secretary of State

**Current Principal Place of Business:**

3582 SOUTHWEST 68 WAY  
MIRAMAR, FL 33023 US

**New Principal Place of Business:**

**Current Mailing Address:**

3582 SOUTHWEST 68 WAY  
MIRAMAR, FL 33023 US

**New Mailing Address:**

FEI Number: 20-1547090      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MCALLISTER, THEOMANA  
3582 SOUTHWEST 68 WAY  
MIRAMAR, FL 33023 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: PRES ( ) Delete  
Name: ODAIYAR, WAILU  
Address: 3582 SOUTHWEST 68 WAY  
City-St-Zip: MIRAMAR, FL 33023

Title: VP/T ( ) Delete  
Name: MCALLISTER, THEOMANA  
Address: 3582 SOUTHWEST 68 WAY  
City-St-Zip: MIRAMAR, FL 33023

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: JEAN, CANTAVE L  
Address: 3582 SOUTHWEST 68 WAY  
City-St-Zip: MIRAMAR, FL 33023

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

Title: SECR ( ) Change (X) Addition  
Name: WAILU, ODAIYAR  
Address: 3285 SW 68 TH WAY  
City-St-Zip: MIRAMAR, FL 33023

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: THEOMANA MCALLISTER

VP

03/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date