## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000103724

Name:

Address: City-St-Zip: HERNANDEZ, ALEXIS S

4155 WHITE PINE AVE

ORLANDO, FL 32811

Entity Name: ROHE AUTO TRANSPORT INC

FILED Apr 05, 2005 Secretary of State

Littly Nai	He. ROHE	AUTO TRANSFORT INC			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
4155 WHITE PINE AVE ORLANDO, FL 32811			6235 GOETHE ST. # 103 ORLANDO, FL 3283	35	
Current M	lailing Addr	ess:	New Mailing Addre	New Mailing Address:	
	ΓΕ PINE AVE ), FL 32811	Ē	6235 GOETHE ST. # 103 ORLANDO, FL 3283	35	
FEI Number:	65-0430567	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
ROJAS, RICARDO 6235 GOETHE ST 103 ORLANDO, FL 32835 US			6235 GÓETHE ST # 103		
	named entit e of Florida.	y submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: RICARDO A. ROJAS				04/05/2005	
Election Car		onic Signature of Registered Ageing Trust Fund Contribution ().	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ROJAS, RIC/ 6235 GOETH ORLANDO, F	IE ST #103	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ORTIZ, JULIO 6059 TWAIN ORLANDO, F	ST #108	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	Р	(X) Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICARDO A. ROJAS P 04/05/2005