## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000024486

Address:

City-St-Zip:

124 LUDLOW DR

LONGWOOD, FL 32779

Entity Name: LUBE ON WHEELS CORPORATION

FILED Feb 09, 2007 Secretary of State

| Current Principal Place of Business:          |                                   |                                | New Principal Place of Business:            |  |  |
|---|-----------------------------------|--------------------------------|---|--|--|
| 124 LUDL<br>LONGWO                            | OW DR<br>OD, FL 32779             | 9                              |   |  |  |
| Current Mailing Address:                      |                                   |                                | New Mailing Address                         | :  |  |
| PO BOX 9<br>LONGWO                            | 15366<br>OD, FL 3279 <sup>.</sup> | 15366                          |   |  |  |
| FEI Number                                    | : 20-2403329                      | FEI Number Applied For ( )     | FEI Number Not Applicable ( )               | Certificate of Status Desired (X)            |  |
| Name and Address of Current Registered Agent: |                                   |                                | Name and Address of                         | Name and Address of New Registered Agent:    |  |
| 124 LUĎL                                      | RNALDO O<br>OW DR<br>OD, FL 32779 | ) US                           |   |  |  |
|   | named entity<br>e of Florida.     | submits this statement for the | purpose of changing its registered          | office or registered agent, or both,         |  |
| SIGNATUI                                      | RE:                               |                                |   |  |  |
|   | Electro                           | nic Signature of Registered Aç | gent  | Date   |  |
| Election Ca                                   | mpaign Financir                   | g Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:                       |                                   |                                | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | RODRIGUEZ,                        | CKSON CIRCLE                   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                          |  |
| Title:<br>Name:                               | T (<br>PEREZ, ARNA                | ) Delete<br>LDO O              | Title:<br>Name:                             | ( ) Change ( ) Addition                      |  |

Address:

City-St-Zip:

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: ARNALDO PEREZ SECR 02/09/2007