## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062457

Entity Name: RUBEN'S AUTO MOTOR, INC.

FILED Feb 27, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1010 N HWY 17-92 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

1010 N HWY 17-92 930 N HWY 17-92 LONGWOOD, FL 32750 LONGWOOD, FL 32750

FEI Number: 57-1220830 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FELIZ, RUBEN
1010 N HWY 17-92
LONGWOOD, FL 32750 US

FELIZ, RUBEN
212 MAGNOLIA PARK TRAIL
SANFORD, FL 32773 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: 02/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: FELIZ, RUBEN Name: LUZ, SALDANA C

 Name:
 FELIZ, RUBEN
 Name:
 LUZ, SALDANA C

 Address:
 1010 N HWY 17-92
 Address:
 132 MAGNOLIA PARK TRAIL

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:
 SANFORD, FL 32773 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 FELIZ, MILTON I
 Name:
 FELIZ, MILTON I

 Address:
 219 ALTAMONTE DRIVE
 Address:
 300 SHEOAH BLVD APT. # 1201

Address: 219 ALTAMONTE DRIVE Address: 300 SHEOAH BLVD APT. # 1201
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: S ( ) Delete Title: S ( ) Change (X) Addition

Name: Name: FELIZ, RUBEN D

Address: Address: 212 MAGNOLIA PARK TRAIL
City-St-Zip: City-St-Zip: SANFORD, FL 32773 US

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: RUBEN D. FELIZ S 02/27/2007