

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000031303

Entity Name: KUMAN MOTORS INC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

3700 NORTH GEORGIA AVENUE
SUITE 3
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

1798 SAWGRASS CIR
WEST PALM BEACH, FL 33413

New Mailing Address:

3700 NORTH GEORGIA AVENUE
SUITE 3
WEST PALM BEACH, FL 33405

FEI Number: 83-0449843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIDORE, ADOLPHE
1798 SAWGRASS CIR
WEST PALM BEACH, FL 33413 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: P () Delete
Name: FORESTE, RONALD
Address: 11256 ORANGE GROVE BLVD
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP () Delete
Name: RIDORE, ADOLPHE
Address: 1798 SAW GRASS CIR
City-St-Zip: WEST PALM BEACH, FL 33413

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MG (X) Change () Addition
Name: FORESTE, RONALD
Address: 11256 ORANGE GROVE BLVD
City-St-Zip: WEST PALM BEACH, FL 33411

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

Title: P () Change (X) Addition
Name: ETIENNE, FRANCOIS T P
Address: 7719 GREAT OAKS DR
City-St-Zip: LAKE WORTH, FL 33467

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: RIDORE ADOLPHE

V

04/15/2009

Electronic Signature of Signing Officer or Director

Date