## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000136859

Entity Name: CONVENIENT AUTO TRANSPORT INC

**FILED** May 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

924 NE 35 AVE 451 SW LAKOTA AVE.

33033 PORT ST LUCIE, FL 34953 HOMESTEAD, FL LIS

**Current Mailing Address: New Mailing Address:** 

924 NE 35 AVE 2723 SW 156 AVE HOMESTEAD, 33033 FL MIAMI, FL 33185 US

FEI Number: 20-5832202 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CLAUDE, LIONEL JR CLAUDE, LIONEL JR 924 NE 35 AVE 2723 SW 156 AVE HOMESTEAD, FL 33033 MIAMI, FL 33185 US 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: LIONEL CLAUD E 05/08/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition CLAUDE, LIONEL JR CLAUDE, LIONEL JR Name: Name: 2723 SW 156 AVE 924 NE 35 AVE Address: Address: City-St-Zip: HOMESTEAD, FL 33033 City-St-Zip: MIAMI, FL 33185

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

VASTEY, CLIFFORD Name: CASIMIR, NATHALIE MARIE Name: 924 NE 35 AVE Address: 16606 SW 55TH TER Address: HOMESTEAD, FL 33033 MIAMI, FL 33185 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: LIONEL CLAUDE JR 05/08/2007