

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000085493

FILED
Aug 11, 2009
Secretary of State**Entity Name:** NEW WAY MOVING SERVICES INC.**Current Principal Place of Business:**99 NW 183RD ST.
239 E
MIAMI, FL 33169 US**New Principal Place of Business:**1400 NE MIAMI GARDENS DRIVE
212
MIAMI, FL 33179 US**Current Mailing Address:**99 NW 183RD ST
239 E
MIAMI, FL 33169 US**New Mailing Address:**1400 NE MIAMI GARDENS DRIVE
212
MIAMI, FL 33179 US**FEI Number:** 26-0618295**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DERHY FINANCIAL SERVICES LLC
99 NW 183RD ST.
138
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**FRIED, GALIT
1400 NE MIAMI GARDENS DRIVE
212
MIAMI, FL 33179 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: FRIED GALIT

08/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ASSULIN, NIRIT
Address: 99 NW 183RD ST # 239 E
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: TURJEMAN, MOSHE
Address: 18630 NE 18TH AVE #136
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ASSULIN, NIRIT
Address: 1400 NE MIAMI GARDENS DRIVE
City-St-Zip: MIAMI, FL 33179

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: NIRIT ASSULIN

P

08/11/2009

Electronic Signature of Signing Officer or Director

Date