

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000092106

Entity Name: MOPAR ESSENTIALS INC

FILED  
Apr 21, 2008  
Secretary of State

## Current Principal Place of Business:

1450 1/2 E. MINNESOTA AV  
ORANGE CITY, FL 32763

## New Principal Place of Business:

1658 DUNLAP DR  
DELTONA, FL 32725

## Current Mailing Address:

1450 1/2 E. MINNESOTA AV  
ORANGE CITY, FL 32763

## New Mailing Address:

1658 DUNLAP DR  
DELTONA, FL 32725

FEI Number: 74-8013597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEGER, KIM  
1450 1/2 E. MINNESOTA AV  
ORANGE CITY, FL 32763 US

## Name and Address of New Registered Agent:

LEGER, KIM  
1658 DUNLAP DR  
DELTONA, FL 32725 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:

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: LEGER, KIM  
Address: 1450 1/2 E. MINNESOTA AV  
City-St-Zip: ORANGE CITY, FL 32763

Title: D ( ) Delete  
Name: SCHMIT, GERALD V  
Address: 1450 1/2 E. MINNESOTA AV  
City-St-Zip: ORANGE CITY, FL 32763

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: LEGER, KIM  
Address: 1658 DUNLAP DR  
City-St-Zip: DELTONA, FL 32725

Title: D (X) Change ( ) Addition  
Name: SCHMIT, GERALD V  
Address: 1658 DUNLAP DR  
City-St-Zip: DELTONA, FL 32725

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: KIM LEGER

DP

04/21/2008

Electronic Signature of Signing Officer or Director

Date