

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000027705

Entity Name: G & A MOTORS INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

540 NORTH STATE RD. 434
SUITE 67
ALTAMONTE SPRING, FL 32714

New Principal Place of Business:

6529 MAGNOLIA HOMES RD
ORLANDO, FL 32810

Current Mailing Address:

540 NORTH STATE RD. 434
SUITE 67
ALTAMONTE SPRING, FL 32714

New Mailing Address:

6529 MAGNOLIA HOMES RD
ORLANDO, FL 32810

FEI Number: 26-2214607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, GAMALIEL
2917 CROTON RD
APOPKA FL., FL 32703 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: LOPEZ, GAMALIEL
Address: 2917 CROTON RD
City-St-Zip: APOPKA, FL 32703

Title: VP (X) Delete
Name: BACENET, ANGEL
Address: 9013 FORT JEFFERSON BLVD
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: GAMALIEL LOPEZ

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date