

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000031638

Entity Name: WRECKERDRIVER, INC.

FILED  
May 09, 2009  
Secretary of State

## Current Principal Place of Business:

114 MAGNOLIA AVE  
SEFFNER, FL 33584

## New Principal Place of Business:

## Current Mailing Address:

114 MAGNOLIA AVE  
SEFFNER, FL 33584

## New Mailing Address:

FEI Number: 26-2371954

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IODICE, COREY  
114 MAGNOLIA AVE  
SEFFNER, FL 33584 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OWNE ( ) Change (X) Addition  
Name: IODICE, COREY  
Address: 114 MAGNOLIA AVE  
City-St-Zip: SEFFNER, FL 33584

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: COREY IODICE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

OWNE

05/09/2009

\_\_\_\_\_  
Date