

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000101031

**FILED**  
**Apr 20, 2009**  
**Secretary of State**

**Entity Name:** M.D.R. TRUCK & AUTO REPAIRS INC.

**Current Principal Place of Business:**

120 WEST 27TH STREET  
APT 6  
HIALEAH, FL 33010

**New Principal Place of Business:**

15489 MIAMI LAKE WAY N.  
APT 102  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

120 WEST 27TH STREET  
APT 6  
HIALEAH, FL 33010

**New Mailing Address:**

15489 MIAMI LAKE WAY N.  
APT 102  
MIAMI LAKES, FL 33014

**FEI Number:** 26-3698241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMOS, MOISES D  
120 WEST 27TH STREET  
APT 6  
HIALEAH, FL 33010 US

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

RAMOS, MOISES D  
15489 MIAMI LAKE WAY N.  
APT 102  
MIAMI LAKES, FL 33014 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: MOISES RAMOS26

04/20/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RAMOS, MOISES D  
Address: 120 WEST 27TH STREET  
City-St-Zip: HIALEAH APT. 6, FL 33010

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RAMOS, MOISES D  
Address: 15489 MIAMI LAKE WAY N. #102  
City-St-Zip: MIAMI LAKES, FL 33014

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: MOISES RAMOS

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date