## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106556

Entity Name: OKEECHOBEE TRUCK COLLISION & BODY REPAIR, INC.

**FILED** Mar 25, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12060 N.W NORTH RIVER DR 12060 N.W SOUTH RIVER DRIVE MEDLEY, 33178

MEDLEY, FL 33178

**Current Mailing Address: New Mailing Address:** 

12060 N.W NORTH RIVER DR 12060 N.W SOUTH RIVER DRIVE MEDLEY, FL 33178 MEDLEY, FL 33178 US

FEI Number: 26-3839571 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AGUILERA, JUAN AGUILERA, JUAN 2180 SW 10 ST 12060 NW SOUTH RIVER DRIVE MIAMI, FL 33135 MIAMI, FL 33178 US 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: JUAN AGUILERA 03/25/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

AGUILERA, JUAN Name: Name: AGUILERA, JUAN 2180 SW 10 ST Address: 12060 NW SOUTH RIVER DRIVE Address:

City-St-Zip: MIAMI, FL 33135 US City-St-Zip: MIAMI, FL 33178 US

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.

Ρ SIGNATURE: JUAN AGUILERA 03/25/2009