

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000075589

Entity Name: CR LUBE OF FLORIDA, INC

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1930 S MILITARY TRAIL  
WEST PALM BEACH, FL 33415 US

**New Principal Place of Business:**

**Current Mailing Address:**

1930 S MILITARY TRAIL  
WEST PALM BEACH, FL 33415 US

**New Mailing Address:**

FEI Number: 27-0905062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAMIREZ, OLMEDO  
444 SAN MATEO DR  
PALM SPRINGS, FL 33461 US

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

RAMIREZ, OLMEDO  
1092 SUMMIT TRAIL CIR  
A  
WEST PALM BEACH, FL 33415 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: OLMEDO RAMIREZ

04/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RAMIREZ, OLMEDO  
Address: 1092 SUMMIT TRAIL CIR APT A  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: VP  
Name: JIMENEZ, NUVIA P  
Address: 1092 SUMMIT TRAIL CIR APT A  
City-St-Zip: WEST PALM BEACH, FL 33415 US

I hereby 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 all other like empowered.

SIGNATURE: OLMEDO RAMIREZ

P

04/26/2011

Electronic Signature of Signing Officer or Director

Date