

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000031243

FILED
Mar 29, 2009
Secretary of State

Entity Name: BARBIC'S TRANSMISSION REPAIR, INC.

Current Principal Place of Business:

6020-D DEACON RD
SARASOTA, FL 34238 US

New Principal Place of Business:

Current Mailing Address:

6020-D DEACON RD
SARASOTA, FL 34238 US

New Mailing Address:

FEI Number: 65-0747805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARBIC, TIM
3635 EMILY LN
SARASOTA, FL 34238 US

Name and Address of New Registered Agent:

BARBIC, TIM
6020 -D DEACON RD
SARASOTA, FL 34238 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: TIM BARBIC

03/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARBIC, TIM
Address: 3635 EMILY LANE
City-St-Zip: SARASOTA, FL 34238

Title: D (X) Delete
Name: BARBIC, SHERRI
Address: 3635 EMILY LANE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARBIC, TIM
Address: 6020-D DEACON RD
City-St-Zip: SARASOTA, FL 34238

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: TIM BARBIC

D

03/29/2009

Electronic Signature of Signing Officer or Director

Date