## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000045966

Entity Name: C\TREK OF FLORIDA, INC.

FILED Feb 10, 2009 Secretary of State

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

2655 S LE JEUNE ROAD 2655 S LE JEUNE ROAD

SUITE 809 SUITE 809

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

16801 FLORENCE VIEW DRIVE 16801 FLORENCE VIEW DRIVE MONTVERDE, FL 34756 US

FEI Number: 59-3449306 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MARTINEZ, ISABEL S ESQ 2655 S LE JEUNE ROAD SUITE 809 CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HUDDERS, EUGENE S Name: HUDDERS, EUGENE S

Address: 16721 MAGNOLIA TERRACE BLVD
City-St-Zip: MONTVERDE, FL 34756
Address: 16721 MAGNOLIA TERRACE BLVD
City-St-Zip: MONTVERDE, FL 34756 US

оку-аедір. Момі VENDE, РЕ 34730 ОЗ

Title: T ( ) Delete Title: T (X) Change ( ) Addition
Name: CAMACHO, NESTOR L Name: CAMACHO, NESTOR L

Address: MANDA VIGO 70 OESTE APT 4F
City-St-Zip: MAYAGUEZ, PR 00680

Address: MENDEZ VIGO 70 OESTE APT 4F
City-St-Zip: MAYAGUEZ, PR 00680 US

( ) Delete Title: Title: VΡ (X) Change ( ) Addition RODRIGUEZ, GREGORIO RODRIGUEZ, GREGORIO Name: Name: 16801 FLORENCE VIEW DR 16801 FLORENCE VIEW DR Address: Address: City-St-Zip: MONTVERDE, FL 34756 City-St-Zip: MONTVERDE, FL 34756 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.

SIGNATURE: NESTOR L CAMACHO T 02/10/2009