

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000051694

Entity Name: BENT WHEEL INC.

FILED  
Feb 19, 2009  
Secretary of State

## Current Principal Place of Business:

14407-B N DALE MABRY  
TAMPA, FL 33618 US

## New Principal Place of Business:

## Current Mailing Address:

14407-B N DALE MABRY  
TAMPA, FL 33618 US

## New Mailing Address:

FEI Number: 59-3455437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ECKMAN, BRIAN  
14938 OLD POINTE ROAD  
TAMPA, FL 33613 US

## Name and Address of New Registered Agent:

ECKMAN, BRIAN  
14407 B NORTH DALE MABRY  
TAMPA, FL 33618 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:

02/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ECKMAN, BRIAN  
Address: 14938 OLD POINTE RD  
City-St-Zip: TAMPA, FL 33613

Title: VPST ( ) Delete  
Name: ECKMAN, BRIAN  
Address: 14938 OLD POINTE RD  
City-St-Zip: TAMPA, FL 33613

Title: O (X) Delete  
Name: ECKMAN, BRIAN  
Address: 14938 OLD POINTE RD  
City-St-Zip: TAMPA, FL 33613

Title: D (X) Delete  
Name: ECKMAN, BRIAN  
Address: 14938 OLD POINTE RD  
City-St-Zip: TAMPA, FL 33613

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OP (X) Change ( ) Addition  
Name: ECKMAN, BRIAN  
Address: 14407 B NORTH DALE MABRY  
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change ( ) Addition  
Name: ECKMAN, JACKIE M  
Address: 14407 B NORTH DALE MABRY  
City-St-Zip: TAMPA, FL 33618

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRIAN ECKMAN

O

02/19/2009

Electronic Signature of Signing Officer or Director

Date