

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000054304

FILED
Feb 02, 2009
Secretary of State

Entity Name: CUSTOM AUTO DELIVERY, INC.

Current Principal Place of Business:

8456 WEST SR 84
DAVIE, FL 33324

New Principal Place of Business:

1692 SW 109TH TERRACE
DAVIE, FL 33324

Current Mailing Address:

8456 WEST SR 84
DAVIE, FL 33324

New Mailing Address:

1692 SW 109TH TERRACE
DAVIE, FL 33324

FEI Number: 65-0769147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALPERN, BARRY
8456 WEST SR 84
DAVIE, FL 33324 US

Name and Address of New Registered Agent:

HALPERN, BARRY
1692 SW 109TH TERRACE
DAVIE, FL 33324 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: BARRY HALPERN

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALPERN, BARRY
Address: 1692 SW 109 TERR.
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BARRY HALPERN

PRES

02/02/2009

Electronic Signature of Signing Officer or Director

Date