

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000079392

Entity Name: ROFRAN PARTS INC.

FILED  
Mar 24, 2009  
Secretary of State

**Current Principal Place of Business:**

5121 NW 1ST STREET  
MIAMI, FL 33126

**New Principal Place of Business:**

5900 N.W. 97TH AVENUE  
BAY# 23  
DORAL, FL 33178 US

**Current Mailing Address:**

PO BOX 824006  
SOUTH FLORIDA, FL 33082

**New Mailing Address:**

PO BOX 824006  
SOUTH FLORIDA, FL 33082 US

FEI Number: 65-0947946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRADE, ROSA E OWNER  
5121 NW 1ST STREET  
MIAMI, FL 33126 US

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

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:**

Title: PRES ( ) Delete  
Name: FRADE, ROSA E OWNER  
Address: 5121 NW 1ST STREET  
City-St-Zip: MIAMI, FL 33126

**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: ROSA E. FRADE

PRES

03/24/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date