

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095907

FILED
Feb 04, 2009
Secretary of State

Entity Name: AMERICAN FRICTION LUBE, INC.

Current Principal Place of Business:

5751 NW 98 AVENUE
MIAMI, FL 331782671

New Principal Place of Business:

Current Mailing Address:

5751 NW 98 AVENUE
MIAMI, FL 331782671

New Mailing Address:

FEI Number: 65-0958670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUTIERREZ DE PINERES, JAIRO
5751 NW 98 AVENUE
MIAMI, FL 331782671 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: DP () Delete
Name: GUTIERREZ DE PINERES, JAIRO
Address: 5751 NW 98 AVENUE
City-St-Zip: MIAMI, FL 331782671

Title: V () Delete
Name: ACEVEDO, MYRIAM
Address: 5751 NW 98 AVENUE
City-St-Zip: MIAMI, FL 331782671

Title: TD () Delete
Name: GUTIERREZ DE PINERES, GABRIEL
Address: 5751 NW 98 AVENUE
City-St-Zip: MIAMI, FL 331782671

Title: SD (X) Delete
Name: PINERES, VIVIAN
Address: 5751 N.W. 98TH AVE.
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MYRIAM ACEVEDO

V

02/04/2009

Electronic Signature of Signing Officer or Director

_____ Date