

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V24882

FILED  
Apr 30, 2011  
Secretary of State

Entity Name: DRIVERS CLUB, INC.

**Current Principal Place of Business:**

1470 NE 125 TERR SUITE 503  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

1470 NE 125 TERR SUITE 503  
MIAMI, FL 33161

**New Mailing Address:**

FEI Number: 65-0325130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOVLA, SEYED M MR.  
1470 NE 125 TERR #503  
MIAMI, FL 33161 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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: MOVLA, SEYED M MR.  
Address: 1470 NE 125 TERR #503  
City-St-Zip: MIAMI, FL 33161

Title: P  
Name: LAJEVARDI, JAFAR M  
Address: 2370 NE 214 ST.  
City-St-Zip: MIAMI, FL 33180

Title: TR  
Name: YAZDANPANAHI, FOROUGH M  
Address: 1470 NE 125 TERR #503  
City-St-Zip: MIAMI, FL 33161

Title: CFO  
Name: PEDRO, CHACE S MR.  
Address: 1470 NE 125TH TER. 503  
City-St-Zip: MIAMI, FL 33161

Title: D  
Name: AYAD, MAGDY MR.  
Address: 744 86 STREET  
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGR  
Name: MOVLA, JAHED  
Address: 12620 VISTA ISLES DR.  
City-St-Zip: PLANTATION, FL 33324

I hereby 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 all other like empowered.

SIGNATURE: SEYED M MOVLA

VP

04/30/2011

Electronic Signature of Signing Officer or Director

Date