

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V33517

FILED
Apr 09, 2009
Secretary of State

Entity Name: AMIGO SCHOOL OF DRIVING INC.

Current Principal Place of Business:

5835 DAHLIA DR.
ORLANDO, FL 32807 US

New Principal Place of Business:

Current Mailing Address:

5835 DAHLIA DR.
ORLANDO, FL 32807 US

New Mailing Address:

FEI Number: 59-3127519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, ISABEL
7969 STRADA DRIVE
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

GONZALEZ, ISABEL
20883 SHELDON ST.
ORLANDO, FL 32833 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: ISABEL GONZALEZ

04/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, ISABEL
Address: 7969 STRADA DRIVE
City-St-Zip: ORLANDO, FL 32822

Title: VP () Delete
Name: GONZALEZ, DARYTSABEL
Address: 7969 STRADA DRIVE
City-St-Zip: ORLANDO, FL 32822

Title: S () Delete
Name: GONZALEZ, DAVID
Address: 7969 STRADA DRIVE
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, ISABEL
Address: 20883 SHELDON ST.
City-St-Zip: ORLANDO, FL 328333

Title: VP (X) Change () Addition
Name: GONZALEZ, DARYTSABEL
Address: 20883 SHELDON ST.
City-St-Zip: ORLANDO, FL 32833

Title: S (X) Change () Addition
Name: GONZALEZ, DAVID
Address: 20883 SHELDON ST.
City-St-Zip: ORLANDO, FL 32833

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: ISABEL GONZALEZ

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date