

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90072 011 ***150.00

DOCUMENT # G97922

1. Entity Name
MARTIN TRUCK SALES, INC.



Principal Place of Business
**7275 N.W. 61 STREET
MIAMI FL 33166**

Mailing Address
**7275 N.W. 61 STREET
MIAMI FL 33166**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2415306**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RODRIGUEZ, MARTIN
7275 N.W. 61 STREET
MIAMI FL 33166**

Name **JOSE IGNACIO MARTINEZ**

Street Address (P.O. Box Number is Not Acceptable)

7275 NW 61 STREET

City **Miami**

FL

Zip Code **33166**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

JOSE I. MARTINEZ, PRES.

01/07/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
PST	RODRIGUEZ, MARTIN	7275 N.W. 61 ST.	MIAMI FL	<input checked="" type="checkbox"/>	DPT	MARTINEZ, JOSE I.	7275 NW 61 STREET	MIAMI, FL 33166	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	DS	CIANCI, PABLO	7275 NW 61 STREET	MIAMI, FL 33166	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	D	PARES, MANUEL	7275 NW 61 STREET	MIAMI, FL 33166	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	D	OYARZABAL, MANUEL	7275 NW 61 STREET	MIAMI, FL 33166	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JOSE I. MARTINEZ**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/07/03

Date

305-884-6190

Daytime Phone #

CR2E034 (10/02)