2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State
04-09-2001 90025 050 ***150.00

020693

DOCUMENT # P93000003613

1. Entity Name
FORKLIFT SALES & EXPORT, INC.

Principal Place of Business	Mailing Address
7785 NW 52ND ST MIAMI FL 33166 US	7785 NW 52ND ST MIAMI FL 33166 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0384681 ☐ 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
ROMERO, MARIA A 19833 NW 87TH COURT HIALEAH FL 33018	Name Street Address (P.O. Box Number is Not Acceptable) 3637 SW 162 Avenue City Miramar FL Zip Code 33027

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.

SIGNATURE ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROMERO, MARIA A 19833 NW 87TH CT HIALEAH FL 33018	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same 3637 SW 162 Avenue Miramar, Fl. 33027	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROMERO, ORLANDO 19833 NW 87TH COURT HIALEAH FL 33018	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same 3637 S.W. 162 Avenue Miramar Fl. 33027	☐ Change ☐ Addition
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CR2E034 (10/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. A. Romero 4/2/01 305/513-0027
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #