

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90073 050 ***158.75

DOCUMENT # 234898 1. Entity Name GENERAL GMC TRUCK SALES AND SERVICE, INC.					
Principal Place of Business 360 SOUTH MILITARY TRAIL WEST PALM BEACH, FL 33415-2895 US			Mailing Address 360 SOUTH MILITARY TRAIL WEST PALM BEACH, FL 33415-2895 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-0904476	
Zip		Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEONARD, DE SANTI 14022 GREEN TREE TRACE WEST PALM BEACH, FL 33414				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		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	PT DESANTI, M 412 MUIRFIELD DR ATLANTIS, FL	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DESANTI M 360 SOUTH MILITARY TR. W.P.B. FL. 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DESANTI, LEONARD 14022 GREENTREE TRACE WELLINGTON, FL 33414	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DESANTI LEONARD 360 SOUTH MILITARY TR. WEST PALM BEACH, FL. 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DESANTI, LEONARD 14022 GREENTREE TRACE WELLINGTON, FL 33414	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DESANTI R. 360 SOUTH MILITARY TR. W.P.B. FL. 33415
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Leonard De Santi</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				4-14-2007 Date	