## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # G97922  1. Entity Name MARTIN TRUCK SALES, INC.								FILED 06 JULII AMII: 49				
Principal Place of Business 7275 N.W. 61 STREET MIAMI, FL 33166			7	Mailing Address 7275 N.W. 61 STREET MIAMI, FL 33166				TECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business 3.				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				07072006	Chg-P	CR2E0	34 (11/05)	
City & State			,	City & State				4. FEI Numb			<u> </u>	oplied For of Applicable
Zip	Country			Zip	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required						
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
MARTINEZ, JOSE     7275 N.W. 61 STREET   MIAMI, FL 33166					Street Ad	Street Address (P.O. Box Number is Not Acceptable)						
Mirani, 1 E 99 100												
			,			City				FL	Zip Cod	
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 segnature required when reinstating). DATE												
9. Election Campaign Finan Amended AR is \$61.25 Trust Fund Contribution.								00 May Be ed to Fees				
10.	PDST	OFFICERS AN	D DIREC	Delete	11. TITL		PD		/CHANGES TO OF	FICERS AND	DIRECTOR:	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	CIANCI, PABLO 7275 NW 61 STREET STREE						1 2		DOOアで 3/0601049	5812 9006		_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS PARES, M 7275 NW MIAMI, FL	61 STREET		<b>⊠</b> Delete			•				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP											☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete				S MARTIN 75 NW Ami , FL	=	I.	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		1					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	City	EET ADDRESS - ST- ZIP	0	K ?			Change	☐ Addilion
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 about it 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 trying employered 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: PASKO CIANCI PIZESIDENT 7/106 (208) 884-6190  SIGNATURE: Datio Dayling Priore #												