## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # J22587 1. Corporation Name

TRACTO DIESEL CORP.

Feb 27, 1999 8:00 am Secretary of State 02-27-1999 90023 026 ***150.00

DIL DD

Principal Place of Business Mailing Address				C SERVING BING VIERL BURE LARGE LARGE CARL CORT BERT RERU RIBIT RERU			etatt aintt taat		
6960 NW 50TH	STREET	- P.O. BOX 527472							
MIAMI FL 3316	6	<del>-MIAMI-FL-83515-747</del> 2		DO NOT WORTE IN THE OBACE					
US		<del> U3</del>	<del>- U3</del>		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed 07/07/1986				
O Delevisor O	I of Division	2a Mailing Address			4. FEI Number		1 1 4 5	stind For	
_	lace of Business	2a. Mailing Address 26 /38-95 SW 38-57			59-2672335		Applied For Not Applicable		
21		26 /38-95 SW 383/ Suite, Apt. #, etc.		39-20/2333		\$8.75 A			
Suite, Apt.	#, etc.	<b>⊢</b> ' '		5. Certifcate of Status Desired		Fee Re	,		
22	<del></del>	City & State		a state of the sta			<del></del>		
City & State	в	$\Box m/m/m/m/m$		6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t			
Zip	Country	28 ////////////////////////////////////		8. This corporation owes the curre	ent voor Intano		01000		
·	25	29 3 3/75 30		5.A	Personal Property Tax.		Yes	□No	
24	9. Name and Address of Curren	25 7 5   56	<del>-                                    </del>		10. Name and Address of New R				
	3. Name and Address of Curren	it Negistered Agent	81	Name /				-	
LEO	NIDAS MENESES			LEO	NIDAS MENO	<u> کے دی</u>			
	NW 54ST		82	Street Addres	ss (P.O. Box Number s Not Accepta				
	WI-FL-33166-		83			<u>.                                     </u>			
		/		m1	AM(_	•			
		/	84		19:11/	FL	85 Zip (	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of									
office or re	egistered agent, or both, in the State	of Florida. Such change was author	rized by t	he corporation	's board of directors. I hereby accep	t the appoint	ient as re	gistered	
	m familiar with, and acquity the obliga	tions of, Section 607.0505, Florida	Statules.			- 71	27/	99	
SIGNATURE	Signature, typed or printed name of the printed ager	at and title if applicable (NOTE: Regis	stered Agent	signature required w	then reinstating)	DATE /		<del>'/-</del>	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12	
TITLE	PD		1.1 TITLE				Change	Addition	
NAME	MENESES, LEONIDAS		1.2 NAME						
STREET ADDRESS	6960 NW 50TH STREET	i i	1.3 STREET	ADDRESS				-	
CITY-ST-ZIP MIAMI FL 33166			1.4 CITY-ST-ZIP					ĺ	
TITLE			2.1 TITLE				Change	☐ Addition	
NAME	ARBELAEZ, MARIA J.		2.2 NAME						
STREET ADDRESS	6960 NW 50 STREET		2.3 STREET	ADDRESS				J	
	MIAMI FL 33166		2. 4 CITY-ST		1				
CITY-ST-ZIP TITLE	MINIM 1 E 33 100		3.1 TITLE	-217		٠, [	Change	Addition	
		B	3.2 NAME			_		İ	
NAME expect approve			3 3 STREET	ADDRESS					
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NAME			5.3 STREET	ADDRESS					
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TITLE			6.2 NAME			۲	7 Auguste		
NAME				*DDDECC	,			}	
STREET ADDRESS			6.3 STREET				,		
CITY-ST-ZIP		/ /	6.4 CITY-ST	-ZIP				}	

14. 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 annual report or supplemental annual 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 of flystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED WATE OF BIGNING SPECIER OR DIRECTOR

Daytime Phone #