

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K30214

FILED
May 04, 2009
Secretary of State

Entity Name: GENERAL TRUCK PARTS & SUPPLIES, INC.

Current Principal Place of Business:

7388 NW 72 AVE
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7388 NW 72 AVE
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-0065632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOSA, HECTOR
13229 NW 10TH STREET
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VINAS, ROLANDO
Address: 3712 S.W. 132ND PL.
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: ESPINOSA, JOSE M.
Address: 13229 NW 10 ST
City-St-Zip: MIAMI, FL 33182

Title: SD () Delete
Name: ESPINOSA, HECTOR
Address: 13229 NW 10TH STREET
City-St-Zip: MIAMI, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SECR () Change (X) Addition
Name: ESPINOSA, HECTOR SECRETA
Address: 13229 NW 10 ST
City-St-Zip: MIAMI, FL 33182 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR ESPINOSA

SECR

05/04/2009

Electronic Signature of Signing Officer or Director

Date