2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000024308

1. Entity Name

GROUNDTEK TRUCK AND EQUIPMENT, LLC

Principal Place of Business	Mailing Address
860 MAGUIRE ROAD OCOEE, FL 34761	860 MAGUIRE ROAD OCOEE, FL 34761

DO NOT WRITE IN THIS SPACE

01042008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
20-4442356	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BORI, GEORGE L
860 MAGUIRE ROAD
OCOEE, FL 34761

DO NOT WRITE IN THIS SPACE

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 signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MMEB
NAME	BORI, GEORGE L
STREET ADDRESS	860 MAGUIRE ROAD
CITY-ST-ZIP	OCOEE, FL 34761

TITLE	MGR
NAME	GUITERREZ, EDUARDO
STREET ADDRESS	860 MAGUIRE ROAD
CITY-ST-ZIP	OCOEE, FL 34761

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _George L. Bori_   1/4/89   4078777473

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #