

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Sep 09, 1999 8:00 am**  
**Secretary of State**

09-09-1999 90001 029 \*\*\*550.00

DOCUMENT # **M06850**

Corporation Name

**TRACTOAMERICA MACHINERY, INC.**

Principal Place of Business

**8330 NW 58th Street  
Miami, Fl 33166**

Mailing Address

**8330 NW 58th Street  
Miami, Fl 33166**



\* 6 613741 90001 29 1 \*

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
Suite, Apt. #, etc.		26		10/24/1984	
City & State		27		4. FEI Number	
Zip		28		59-2778150	
Country		29		Applied For	
25		30		Not Applicable	
5. Certificate of Status Desired		31		\$8.75 Additional Fee Required	
6. Election Campaign Financing		32		\$5.00 May Be Added to Fees	
Trust Fund Contribution		33			

9. Name and Address of Current Registered Agent

**TERAN, CARLOS A.  
8330 NW 58th Street  
Miami, Fl 33166**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

I, Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 obligations of, Section 617.0503, Florida Statutes.

GNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable					
OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12-	
LE	D	1.1 TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
ME	TERAN, ROGER	1.2 NAME	TERAN, ROGER		
REET ADDRESS	8330 NW 58th Street	1.3 STREET ADDRESS	8330 NW 58 Street		
Y-ST-ZIP	Miami, Fl	1.4 CITY-ST-ZIP	Miami, Fl		
LE	DV	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
ME	TERAN, NELDA	2.2 NAME			
REET ADDRESS	8330 NW 58th Street	2.3 STREET ADDRESS			
Y-ST-ZIP	Miami, Fl	2.4 CITY-ST-ZIP			
LE	DP	3.1 TITLE	D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
ME	TERAN, ROGER F.	3.2 NAME	TERAN, ROGER F.		
REET ADDRESS	8330 NW 58th Street	3.3 STREET ADDRESS	8330 NW 58 Street		
Y-ST-ZIP	Miami, Fl	3.4 CITY-ST-ZIP	Miami, Fl		
LE	DVS	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
ME	TERAN, CARLOS A.	4.2 NAME			
REET ADDRESS	8330 NW 58th Street	4.3 STREET ADDRESS			
Y-ST-ZIP	Miami, Fl	4.4 CITY-ST-ZIP			
LE	DVAS	5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
ME	TERAN, ALEJANDRO	5.2 NAME	TERAN, ALEJANDRO		
REET ADDRESS	8330 NW 58th Street	5.3 STREET ADDRESS	8330 NW 58 Street		
Y-ST-ZIP	Miami, Fl	5.4 CITY-ST-ZIP	Miami, Fl		
LE		6.1 TITLE	D/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
ME		6.2 NAME	TERAN, ANABEL		
REET ADDRESS		6.3 STREET ADDRESS	8330 NW 58 Street		
Y-ST-ZIP		6.4 CITY-ST-ZIP	Miami, Fl		

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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-20-99

Date

(305) 377-8000

Daytime Phone #

CR2E037 (1/98)