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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M1481

(1)

ARTURO OKEECHOBEE MOTOR INC.

FILED
May 14 1998 8:00am
Secretary of State



Pri	n cipal Place	of Business	3	Mailing Address						
	12790 CAIR			12790 CAIRO I						
	OPALOCKA	FL 33 054		OPALOCKA FL	OPALOCKA FL 33054				DO NOT WIDITE IN THIS SPACE	
								DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified 04/26/1985		
_	Dringing! (II	one of Punio	000	An Mailing Addre	300	-			4. FEI Number Applied For	
2. Principal Place of Business				2a. Mailing Address				59-2529331 Not Applicable		
					Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·		
Sulte, Apt. #, etc.			— — · · · ·	—				5. Certificate of Status Desired See Regulred		
22	City & State				City & State					
-	City & State	7		}ı ′					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23	Zip					Country	,-		8. This corporation owes or has paid the current year Intangible	
_	Zip	-		29	30	1 '			Personal Property Tax due June 30. Yes No	
25 29 29 South Address of Current Registered Agent						10. Name and Address of New Registered Agent				
		UTIERREZ,				B1	T	Name		
							Ļ.			
2795 E . 7 AVE. HIA LE AH FL 33013				82 S		Street Ado	dress (P.O. Box Number is Not Acceptable)			
	п	INLEAD FL	33013			83	+			
						"				
						84	1	City	FL 85 Žip Code	
							l.,	 -		
11.	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. Thereby accept the appointment as 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes										
SI	SNATURE .		. 							
		Signature, typed		d agont and title d applicable	(NOTE: Re	·	ent	t signaturo requ	puired when reinstating) DATE	
12		PD	OFFICERS	AND DIRECTORS DE	ETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE		GUTIERREZ, ARTURO			LCIL					
NAME		2795 E. 7 AVE.				1.2 NAME				
STR	EET ADDRESS					1.3 STREET				
_	Y-ST-ZIP	HIALE/	AN FL		1575	1.4 CITY - S	ST-	- ZIP	Change Addition	
TITL	· .	_ Ab	DDET MOULDS	[] DEI	LEIC	2.1 TITLE			Change C Addition	
.NAI			RREZ, RICHARD			2.2 NAME				
•	EET ADDRESS		EAST 7 AVENUE			2.3 STREET				
	Y-ST-ZIP	HIALE	AN PL		4 F.T.F	2. 4 CITY-	ŞT.	- ZIP	Observe C 6460	
TITL	Ŧ			DE	LETE	3.1 TITLE			[_] Change	
NAM	1					3.2 NAME				
STREET ADDRESS						3.3 STREET	T AI	.ddress		
CITY - ST - ZIP						3.4. CITY -	\$1	-ZiP		
TITLE				□ DE	LETE	4.1 TITLE			Change Additio	
NAM	AE					4. 2 NAME				
STR	EET ADDRESS					4.3 STREET	TAI	.ddress		
CITY-ST-ZIP						4.4 CITY-5	SI-	ZIP		
TITLE			[_] DELET			5.1 TITLE			☐ Change ☐ Addition	
NAME						5.2 NAME				
STREET ADDRESS					1	5.3 STREET ADDRESS				
CITY-ST-ZIP						5.4 CITY-5	ŝT-	-ZIP		
TIFL	£			☐ DE	LETE	61 TITLE			Change Additio	
NA	AE					6.2 NAME				
STR	EET ADDRESS	•			1	6.3 STREE	T A	DDRESS		
CIT	Y-ST-ZIP					6.4 CITY - 5				
14	I hereby o	ertify that the	e information supplic	ed with this filing does not	qualify for th	ne exemp	otic	on stated in	in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
	officer or a	director of th	ie corporation or the	ental arinual report is true receiver or trustee empow attachment with an addres	vered to exe	ne and the cute this	re	eport as rec	ature shall have the same legal effect as if made under oath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in	