

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000025156

FILED
Oct 04, 2007
Secretary of State

Entity Name: STRATFORD TRACTOR PARTS CORP.

Current Principal Place of Business:

8304 N.W. 56TH STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8304 N.W. 56TH STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-1088465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, MANUEL ARTHUR ESQ.
37TH FLOOR
100 SOUTHEAST 2ND STREET
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

CRESPO, ALEJANDRO A
9260 SW 72ND STREET
SUITE #117
MIAMI, FL 33173 US

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: ALEJANDRO A. CRESPO

10/04/2007

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: P/D () Delete
Name: DE SALES, CARLOS
Address: 8304 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33166

Title: VP/D () Delete
Name: DE SALES, CLEOFE
Address: 8304 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33166

Title: T/D () Delete
Name: DE SALES, JANICE
Address: 8304 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33166

Title: S/D () Delete
Name: DE SALES, JUAN CARLOS
Address: 8304 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: DE SALES, CARLA
Address: 8304 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: JIMENEZ, EMILIA
Address: 8304 N.W. 56TH STREET
City-St-Zip: MIAMI, FL 33166

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

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

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

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: CARLOS DE SALES

P

10/04/2007

Electronic Signature of Signing Officer or Director

Date