2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000025156

Entity Name: STRATFORD TRACTOR PARTS CORP.

FILED Oct 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
8304 N.W. MIAMI, FL	56TH STREE 33166	T			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
8304 N.W. MIAMI, FL	56TH STREE 33166	ΞΤ			
FEI Number:	: 65-1088465	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
9260 SW 7 SUITE #11	ALEJANDRO 72ND STREET 7 33173 US				
	named entity e of Florida.	submits this statement for the pu	pose of changing its register	red office or registered agent, or both,	
SIGNATUR	RE: ALEJANI	DRO A. CRESPO			
	Electro	nic Signature of Registered Agen	ţ	Date	
Election Car		03(2)(b), F.S., the corporation did not r g Trust Fund Contribution (). CTORS:	·	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D (DE SALES, CA 8304 N.W. 56T MIAMI, FL 331	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP/D (DE SALES, CL 8304 N.W. 56T MIAMI, FL 331	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T/D (DE SALES, JA 8304 N.W. 56T MIAMI, FL 331	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S/D (DE SALES, JU 8304 N.W. 56T MIAMI, FL 331	AN CARLOS 'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (DE SALES, CA 8304 N.W. 56T MIAMI, FL 331	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (JIMENEZ, EMI 8304 N.W. 56T MIAMI, FL 331	'H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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/D 10/30/2008