


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90182 004 ***150.00

DOCUMENT # P02000083760 1. Entity Name UNION MOTORS INC.	
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Principal Place of Business 1705 E TAMiami TRAIL NAPLES, FL 34112	Mailing Address 4143 KATHY AVE NAPLES, FL 34104
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50048248



04182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3075469	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MUNOZ, RICARDO JR 4143 KATHY AVE NAPLES, FL 34104	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE P	MUNOZ, RICARDO JR 4143 KATHY AVE NAPLES, FL 34104
TITLE S	MUNOZ, MAGDA 4143 KATHY AVE NAPLES, FL 34104
TITLE VP - Jose	Alonzo Duran 1230 Brookside Dr Naples FL 34104
TITLE Treasurer	Sergio Duran 1200 Brookside Dr Naples FL 34104
TITLE NAME	STREET ADDRESS
TITLE NAME	STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	4/28/05 239-289-6411
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>