

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 13, 2004 8:00 am**  
**Secretary of State**

07-13-2004 90007 042 \*\*\*150.00

**DOCUMENT # P02000115373**

1. Entity Name

**ALL ADVANCED AUTOMOTIVE TECHNOLOGY INC.**



Principal Place of Business

**1660 W 40TH ST  
HIALEAH, FL 33012**

Mailing Address

**1660 W 40TH ST  
HIALEAH, FL 33012**

**DO NOT WRITE IN THIS SPACE**



07012004

No Chg-P

CR2E034 (10/03)

4. FEI Number

**41-2065191**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**HECHEVARRIA, GUILLERMO  
7980- N.W.-186-TERR  
MIAMI, FL 33015**

**DO NOT WRITE  
IN THIS SPACE**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!! FEE IS \$550.00  
Due by September 8, 2004**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
HECHEVARRIA, BARBARA  
1660- W- 40 ,ST.  
HIALEAH,, FL 33012**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**7/8/04**  
Date

**305- 825-7505**  
Daytime Phone #

Attachment

44048158

#P02000115373

ADVANCED AUTOMOTIVE TECHNOLOGY INC.  
1660-W-40, ST.  
HIALEAH, FLA 33012.  
BUS/305-825-7505  
FAX-305-8253062

7/8/2004

To Whom It May Concern: Please make notice that we did not receive any information in regards  
To the Annual Profit Report.

We only received the Postcard Last week. We will make an automatic adjustment to our accounts payable  
Department, to automatically send you the required check on January of every year.

We are sending you a check in the amount of \$150.00- for this year.  
Thank you for your time and effort's allowing us to pay.

Sincerely,  
Guillermo Hechevarria.