

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P02000127956</b> 1. Entity Name DEL PINO - MXP MACHINE SHOP, INC.	
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Principal Place of Business 4602 E 10 CT HIALEAH, FL 33013	Mailing Address 4602 E 10 CT HIALEAH, FL 33013
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**DO NOT WRITE IN THIS SPACE**



03212007 No Chg-P CR2E034 (11/05)

4. FEI Number 03-0496725	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

SANTANA-DEL, CARMEN  
18714 S.W. 28TH CT  
MIRAMAR, FL 33029

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DEL PINO, FEDERICO 18714 S.W. 28TH CT MIRAMAR, FL 33029
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SANTANA-DEL PINO, CARMEN 18714 S.W. 28TH CT MIRAMAR, FL 33029
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04/04/07-80039-019 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Carmen Santana CARMEN SANTANA Vice President 03/26/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone