2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000007742

1. Entity Name
SELECTIVE CARS & TRUCKS, INC.

Principal Place of Business
3634 NW 36 STREET
MIAMI, FL 33142

Mailing Address
3634 NW 36 STREET
MIAMI, FL 33142

04072005 No Chg P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
84-1620159

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DEL REY, MIRTHA
3634 NW 36 STREET
MIAMI, FL 33142

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 of new registered agent, if changing DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DEL REY, MIRTHA
STREET ADDRESS	8123 NW 158 TERRACE
CITY ST ZIP	MIAMI LAKES, FL 33016
TITLE	D
NAME	DEL REY, ORLANDO
STREET ADDRESS	8123 NW 158 TERRACE
CITY ST ZIP	MIAMI LAKES, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

U00000316883
04/19/05-80094-022 8.75

U00000316883
04/19/05-80094-023 150.00

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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 DATE