

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

05 FEB 10 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000056554	
1. Entity Name El Grande Trucks General Repairs Corp	

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 04-05

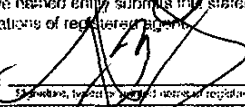
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9101 W Okeechobee Rd.		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Hialeah Gardens, FL		City & State	
Zip 33016	Country USA	Zip	Country
4. FEI Number 58-2674245		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Abel M. Marquez	
Street Address (P.O. Box Number is Not Acceptable)	
11200 NW S. River Dr.	
City Medley	FL Zip Code 33178

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:  DATE: _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

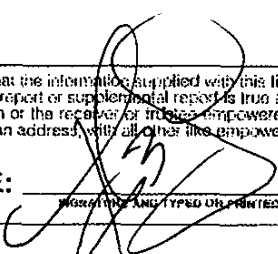
Make Check Payable to Florida Department of State

D. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE	NAME	TITLE	NAME
Abel M. Marquez	11200 NW S. River Dr.		
CITY-STATE-ZIP	Medley, FL 33178		
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME

**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(5)(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 on an attachment with an address with all other like empowered.

SIGNATURE:  DATE: _____

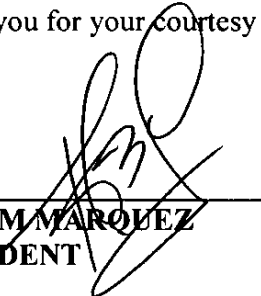
CR2E034B (12/02)

Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Per instructions from the Division of Corporations, I am attaching a check, in the amount of \$300.00 for the annual report fee with my application.

We did not receive the U.B.R. for the year 2004 or any other notice from the Division of Corporations in respect with the Corporation **EL GRANDE TRUCKS GENERAL REPAIRS CORP**

Thank you for your courtesy in this matter.



ABEL M. MARQUEZ
PRESIDENT