

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000066839

1. Entity Name
INTERNATIONAL MOTORS II OF PALM BEACH, CORP.



Principal Place of Business
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463

Mailing Address
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463



04022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
83-0363897

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

AGUIRRE, FRANCIS J
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463

**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 \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

U00000821960
05/15/08-80028-004 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
AGUIRRE, FRANCIS J
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
AMAYA, JORGE F
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC.
PABLO, JOSE A
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREA
ARTEAGA, GUILLERMO J
3475 S. MILITARY TRAIL
LAKE WORTH, FL 33463

TITLE
NAME
STREET ADDRESS
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/2008 561-432-4606
Date Daytime Phone #