

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P03000089614</b>	
1. Entity Name <b>TOTAL INDUSTRIAL EQUIPMENTS &amp; PARTS CORP.</b>	
Principal Place of Business <b>780 NW 42 AVE #416 MIAMI, FL 33126</b>	Mailing Address <b>780 NW 42 AVE SUITE 416 MIAMI, FL 33126</b>



04032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>42-1604836</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**CORDOYA, ANGEL D  
780 NW 42ND AVE  
SUITE 416  
MIAMI, FL 33126**

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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	PD BALLIA, ADIB 174 EAST 45TH STREET MIAMI, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DE BALLIA, JUTHY 174 EAST 45TH STREET MIAMI, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GONZALEZ, GEORGE 174 EAST 45TH STREET MIAMI, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
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05/02/07-80009-005 150.00

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: X** *Adib Ballia* **ADIB BALLIA, PRES.** **4/03/07** Daytime Phone \_\_\_\_\_