

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90015 012 ***158.75

DOCUMENT # P03000101581



1. Entity Name
SANTA CLARA MOTORS, CORP.

Principal Place of Business
**13050 NW 30 AVE
OPA LOCKA, FL 33054**

Mailing Address
**13050 NW 30 AVE
OPA LOCKA, FL 33054**

44011089



2. Principal Place of Business

3. Mailing Address

02092004 Chg-P CR2E034 (10/03)

4. FEI Number

51-0483493

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**YERA, ARNALDO
13050 NW 30 AVE
OPA LOCKA, FL 33054**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
YERA, ARNALDO
2445 W 54 PL
HIALEAH, FL 33016**

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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CITY - ST - ZIP

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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: **ARNALDO YERA**

2/9/04

305-391-1087

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #