

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 27, 2006 08:00 AM
Secretary of State**

DOCUMENT # P04000058302

**1. Entity Name
NELSON TRUCK ELECTRIC, INC.**



**Principal Place of Business
621 E. 35 ST
HIALEAH, FL 33013**

**Mailing Address
621 E. 35 ST
HIALEAH, FL 33013**



04232008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0969466
Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RODRIGUEZ, NELSON F
621 E. 35 ST
HIALEAH, FL 33013**

**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, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

**TITLE P
NAME RODRIGUEZ, NELSON F
STREET ADDRESS 621 E. 35 ST
CITY-ST-ZIP HIALEAH, FL 33013**

**TITLE T
NAME RODRIGUEZ, PAULA M
STREET ADDRESS 621 E. 35 ST
CITY-ST-ZIP HIALEAH, FL 33013**

**TITLE S
NAME NEGRIN, SIORAMYS
STREET ADDRESS 1861 S. W. 124TH WAY
CITY-ST-ZIP MIRAMAR, FL 33027**

**TITLE V
NAME RODRIGUEZ, GEORGE
STREET ADDRESS 621 E. 35 ST
CITY-ST-ZIP HIALEAH, FL 33013**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

U000000539191
05/09/06-80088-018 150.00

**DO NOT WRITE
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: Sioramys Negrin 4/24/06 305-992-2627
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #