


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000142689		
1. Entity Name D & G HYDRAULICS, INC.		

FILED
06 FEB 14 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 701 SW 106TH AVE PEMBROKE PINES, FL 33026 N.W.	Mailing Address 701 SW 106TH AVE PEMBROKE PINES, FL 33026 N.W.
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2. Principal Place of Business 701 N.W. 106th ave Suite, Apt. #, etc.	3. Mailing Address 701 N.W. 106th ave Suite, Apt. #, etc.
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City & State Pembroke Pines, FL	City & State Pembroke Pines, FL	4. FEI Number 58-2685054	Applied For <input type="checkbox"/> Not Applicable
Zip 33026	Country USA	Zip 33026	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent IDEN: BRUCE, F 3240 CORPORATE WAY MIRAMAR, FL 33025
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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 <i>Ehain Sib</i>	DATE

FILE NOW!!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIPLE, EFRAIN 701 NW 106 AVE PEMBROKE PINES, FL 33026 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500066251365 02/21/06--01012--002 **300.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>1/2/14</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: <i>Ehain Sib</i>	Date <i>11/20/05</i> Daytime Phone # <i>673-5776</i>

D & G HYDRAULICS, INC.
701 N.W. 106TH AVE
PEMBROKE PINES, FL, 33026
(954) 673-5776 FAX (954) 433-7238

February 9, 2006


DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL, 32314

DOCUMENT# P04000142689

REF: AMENDMENT

DEAR MR. SEAN TONER (SENIOR SECTION ADMINISTRATOR)

WE NEVER RECEIVED PAPER WORK & WERE NOT AWARE
OF THIS FORM WE HAD TO RETURN. WE ARE ASKING TO PLEASE ACCEPT
OUR AMENDMENT.

SINCERELY,

EFFRAIN SIPLE
PRESIDENT