

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2008 8:00 am**  
**Secretary of State**

05-14-2008 90011 013 \*\*\*150.00

<b>DOCUMENT # P07000008694</b> 1. Entity Name <b>WILLY HEAVY EQUIPMENT REPAIR, CORP.</b>					
Principal Place of Business <b>6278 W 22 CT #4</b> <b>HIALEAH, FL 33016</b>			Mailing Address <b>6278 W 22 CT #4</b> <b>HIALEAH, FL 33016</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<div style="display: flex; justify-content: space-between;"> <span>05112008    Chg-P    CR2E034 (12/06)</span> </div>					
4. FEI Number <b>20-8673106</b>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
<b>PINEDA, EDGARDO W</b> <b>6278 W 22 CT #4</b> <b>HIALEAH, FL 33016</b>			Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PINEDA, EDGARDO W 6278 W 22 CT #4 HIALEAH, FL 33016	<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			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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.					
<b>SIGNATURE:</b> 		05/11/08			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date    Daytime Phone #			

ATTACHMENT

40101838

May 11, 2008

To: Florida Dept. of State  
Division of Corporations  
P.O Box 1500  
Tallahassee, Fl 32302-1500

From: Willy Heavy Equipment Repair, Corp.  
Edgardo W. Pineda  
6278 W 22 Ct #4  
Hialeah, Fl 33016  
Ref.: Document # P07000008694

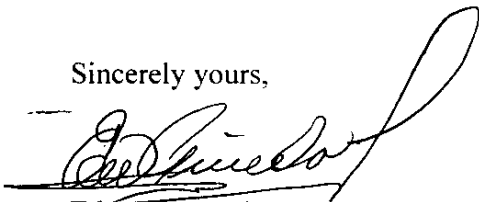
Dear Representative:

I was find out today that my corporation have to paid \$150.00 fees for Annual Report, And when I try to paid online the payment should be different that \$400.00 more for Late payment. We started the corporation on April 2007, and We never received any notification for the payment due on May 1, 2008. What I have to do now, because this is very small business running very slow and don't be able to paid certain amount of fees. Do you can excuse me in my first year of Business.

I have been attached the check for \$150.00 dollars, please verify my information and let me know how You can help me to keeping my Corporation Active.

I'm sorry for any inconvenience,

Sincerely yours,



Edgardo W. Pineda  
President