

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000035031

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** SARRIAS TRUCK REPAIRS INC.

**Current Principal Place of Business:**

10125 NW 87 AVE  
MEDLEY, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

10125 NW 87 AVE  
MEDLEY, FL 33178

**New Mailing Address:**

**FEI Number:** 26-4715551

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SARRIAS, ORLANDO  
3905 E LAKE TERR  
MIRAMAR, FL 33023 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SARRIAS, ORLANDO  
Address: 3905 E LAKE TERR  
City-St-Zip: MIRAMAR, FL 33023

Title: VP  
Name: EGGER, EMILIO  
Address: 13147 SW 11 LANE CIRCLE  
City-St-Zip: MIAMI, FL 33184

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ORLANDO SARRIAS

OWNE

04/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date