

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P11000107339

1. Entity Name  
HIRAM AUTO SALES INC



Principal Place of Business  
1400 FORSYTHE RD BAY E  
WEST PALM BEACH, FL 33415 US

Mailing Address  
1400 FORSYTHE RD BAY E  
WEST PALM BEACH, FL 33415 US

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

05082012

Chg-P

CR2E034 (12/11)

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SALGADO, GREGORY J P.T.A  
721 BELVEDERE RD  
WEST PALM BEACH, FL 33405

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

5204 S. DIXIE HWY  
City WPA FL Zip Code 33405

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 Hiram Pacheco  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 28, 2012**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME PACHECO, HIRAM  
STREET ADDRESS 5204 S DIXIE HWY  
CITY- ST- ZIP WEST PALM BEACH, FL 33405 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
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CITY- ST- ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition  
200235372182  
05/21/12--01004--025 \*\*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition  
MAY 21 2012  
S. PRATHER

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: Hiram Pacheco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

E-MAIL ADDRESS

5-16-12 Hiramtoyota@yahoo.com

FILED

12 MAY 21 AM 8:16

CLERK OF STATE  
TALLAHASSEE, FLORIDA

