FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1997 8:00am

Secretary of State

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2-19-97 (305)279-2125

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

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DOCUMENT # P9300006539 (9)

U.S. TRACTOR, INC.

	ce of Business BOTH TERRACE 173	Mailing Address 11560 S.W. 80TH TERRA MIAMI FL 33173-3608	11560 S.W. BOTH TERRACE		-		
	,				3. Date Incorporated or Qualified 01/27/1993	3a. Date of Las	
2. Principal 21	Place of Business	2a. Mailing Address 26			4. FEI Number 65-0386684		Applied For Not Applicable
Suite, Apt	(#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
City & Sta	ate	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
7ip 24	Country 25	Z _I p 29	Countr 30	у	8. This corporation has liability for i Florida Statutes	Yes No	ır s. 199.032,
) IA	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New P6	Netered Agent	
VALENZUELA, JORGE O 11560 S.W. 80TH TERRACE			0.7	\	ress (P.O. Box Number is Not Acceptab	lo)	
	AMI FL 33173		82 Stre		Juless (F.O. Box Number is Not Acceptable)		
			84	City		FL 85 Z	ip Code
office or	registered agent, or both, in the Stat am familiar with, and accept the obli	te of Florida, Such change was gations of, Section 607,0505, F	authorized b forida Statute	y the corporal	poration submits this statement for the p tion's board of directors. I hereby accep	t the appointment	g its registered as registered
12.	Standing type disciplated name of majorithmode OFFICERS AL	gent and title it applicable (NO NO DIRECTORS	TE: Registered Aç	ent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECT	ORS IN 12
THE	PD	DELETE	1.1 TITLE		ADDITIONAJOH MAGEO TO OTTIO	Chang	
NAME	VALENZUELA, JORGE O		1.2 NAME				
STREET ADDRESS	11560 S.W. 80TH TERRACE MIAMI FL 33173		1	T ADDRESS			
CITY - ST - ZIP	MIAMI FL 331/3	DELETE	1.4 CITY - 2.1 TITLE	ST-ZIP		Chan	ge 🔲 Addition
NAME		المنافع	2.2 NAME				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-SI-ZIP			2. 4 CHY-	ST-ZiP			
THTLE		☐ DELETE	3 1 TITLE	i		Chang	ge 🔲 Addition
NAME			32 NAME	i			
STREET ADDRESS CITY+ST-ZIP) <u>.</u>		33 STREE	T ADDRESS			
Tift(DELETE	4 1 TELE			Chan	ge Addition
NAME			4 2 NAMI	<u> </u>			
\$TREET ADDRESS	i		4.3 STREE	T ADDRESS			
CHY-ST ZIP			4.4 C(TY-				
TITLE		DELETE	5 1 TITLE			L. Chan	ge Addition
NAME			5 2 NAME				
STREET ADDRESS	5			T ADDRESS	•		
City-St ZiP		DELETE	5.4 CITY - 6.1 TITLE			☐ Chan	ge Addition
NAME			6.2 NAME	1			
CTRCCL ADDRESS	. 1			T Annares			

6.4 CITY-ST-ZIP

14. Ido 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 annual report of supplemental annual 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 of 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