2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

MEDLEY FL 33166

3. Mailing Address

Suite, Apt. #, etc.

BAY B

US

9090 NW S RIVER ST

P93000027286

DOCUMENT # 1. Entity Name

Principal Place of Business

2. Principal Place of Business

9090 NW S RIVER ST

Suite, Apt. #, etc.

MEDLEY FL 33166

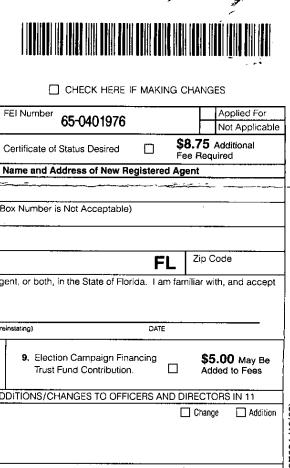
BAY B

RAULS FORKLIFTS, CORP.



FILED Mar 10, 2003 8:00 am Secretary of State

03-10-2003 90771 044 ***150.00



City & State		City & State		4. FEI Number 65-0401976	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired Fe	3.75 Additional e Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Age	ent	
RODRIGUEZ, RAUL E			- Namo	Name Street Address (P.O. Box Number is Not Acceptable)		
9090 NW Miami Fl	S RIVER DR BAY 8 33166					
			City	FL	Zip Code	
8. The above the obliga-	e named entity submits this statement fo tions of registered agent.	r the purpose of changing	its registered office or regis	tered agent, or both, in the State of Florida. I am farr	illiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (N	OTE: Registered Agent signature requi	ired when reinstating) DATE		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	State		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	PSTD RODRIGUEZ, RAUL E 9090 NW S RIVER DR BAY 8 MEDLEY FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	į	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME SYREET ADDRESS CITY-ST-ZIP		Change ☐ Addition	

e and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ged to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if all other like empowered. of the corporation or the receiver or trustee empo-

1-13-03