## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 22, 2005 8:00 am Secretary of State DOCUMENT # P94000018945 04-22-2005 90274 022 \*\*\*150 00 1. Entity Name MIAMI FORK LIFT SERVICES, CORP. Principal Place of Business Mailing Address **7910 WEST 25TH AVE 7910 WEST 25TH AVE** HIALEAH, FL 33016 HIALEAH, FL 33016 2. Principal Place of Business 3. Mailing Address Sulte, Apt. #, etc. Suite, Apt. #, etc. 03172005 Cho-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0474373 Not Applicable Country Zin Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERRERA, JORGE L Street Address (P.O. Box Number is Not Acceptable) **7910 WEST 25TH AVE** HIALEAH, FL 33016 Zlp Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Renistered Agent signature required when reinstating) CATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DTE ☐ Detete TITLE Change ☐ Addition NAME HERRERA, JÖRGE L NAME HERRERA JORGE L. STREET ADDRESS 7910 WEST 25TH AVE STREET ADDRESS 330/6 CITY-ST-ZIP HIALEAH, FL 33016 CITY-ST-ZIP HIALEAH. TITLE Delete TITLE Change X Addition NAME NAME HERRERA IRIS N. 7910 WEST JOH AVE WIRLEAH FL. 33016. STREET ADDRESS STREET ADORESS CITY-ST-ZP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST- NP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deteta TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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: (

FILED