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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000034452 (0)

## **DELTA HEAVY PARTS CORP**

Principal Place	e of Business	Mailing Address			1 INDUINDU IND NEWS DIDIN ADMIN ADMIN DENS DENDA INNE BURN DIDDI BUND HON HEAL			
4450 NW 79 A MIAMI FL 3316		4450 NW 79 AVE SUITE 1-B MIAMI FL 33166-6309						
					3. Date Incorporated or Qualified 05/04/1994		e of Last R 27/1996	eport
L	ace of Business	2a. Mailing Address		4. FEI Number Applied For			oplied For	
21 6928 NW 72nd AVENUE  State, Apt. #, etc.		26		<b>65-0493815</b> Not Applicate			<del></del>	
22		Suite, Apt #, etc.			5. Certificate of Status Desired	<u> </u>	\$8.75 / Fee Re	Additional equired
City & State  23 MIAMI, FL		City & State		6. Election Campaign Financing \$5.00 May Be				
23 MIAM Zip	Country	<b>[28]</b> Zip	Countr		Trust Fund Contribution		Added	
3316	k	29	30	,	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
231	9. Name and Address of Current		1301		10. Name and Address of New Re			
AI V	AREZ, JORGE J		81	Name				
	NW 79 SUITE 1-B		82	Stroot Add	Address (P.O. Box Number is Not Acceptable)			
	MI FL 33166				duress (F.O. Box Number is Not Acceptable)			
			83	:				
			84	City		FL	<b>85</b> Zip	Code
office or n agent Tar SIGNATURE	eg stored agent or both, in the State or familiar with, and accept the obligations, seed or protest mine of regisers. Lager	of Florida. Such change was tions of, Section 607.0505, F	s authorized by Florida Statute	y the corpora s.	poration submits this statement for the p ation's board of directors. I hereby accep ared when reinstating)	the appo	intment as	registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12
THLE	PTSD	DELETE	1.1 TITLE			I	Change	Addition
NAM:	ALVAREZ, JORGE J		1.2 NAME					
STREET ADDRESS	4450 NW 79 AVE SUITE 1-8		1.3 STREET ADDRESS					
C(1+51-2)P	MIAMI FL 33166		1.4 CITY - 5	ST-ZIP				
THLE		L DELETE	2.1 TITLE			ι	Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE					
CHY+S1+ZIP THILE		DELETE	2 4 CITY - 3.1 TITLE	S1-ZIP			Change	Addition
NAME		325				ι	— счинде	LI MODERAL
STREET ACEDRESS			3 3 STREET	ADDRESS				
C(F) - S1 - Z(P)			3.4. City.					
1016			4.1 TITLE				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
C-1Y - ST - ZiP			4.4 CITY - 5	ST - ZIP				
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAM:			5 2 NAME		•			
STREET ADDRESS			5.3 STREET	ADDRESS				
C TY+ST-Z-P			5.4 CITY - S	ST-ZIP				
TillE		☐ DELETE	6.1 TIPLE			l	Change	Addition
BLAKE:			■ COMMAN					

SIGNATURE:

14. I do hereby certify that the information indicated on this at a an en officer or director of the

appears in Block 12 or Bloc

STREET ADDRESS

011Y - ST - ZIP

Jorge J. Alvirez

6 3 STREET ADDRESS

If I with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the y supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

25/97 (305) &87-8005

**FILED** 

Mar 05 1997 8:00am

Secretary of State