

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000071528

FILED
Apr 29, 2005
Secretary of State

Entity Name: NATION FORKLIFT CORPORATION

Current Principal Place of Business:

6803 HARTFORD
TAMPA, FL 33619 US

New Principal Place of Business:

6802 HARTFORD
TAMPA, FL 33619 US

Current Mailing Address:

6803 HARTFORD
TAMPA, FL 33619 US

New Mailing Address:

6802 HARTFORD
TAMPA, FL 33619 US

FEI Number: 59-3205506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIL, ISABEL
3224 PALMETTO STREET
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

GIL, ISABEL
6802 HARTFORD
TAMPA, FL 33619 US

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.

SIGNATURE: ISABEL GIL

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GIL, PEDRO
Address: 6802 HARTFORD
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: GIL, ISABEL
Address: 6802 HARTFORD
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEDRO GIL

MR

04/29/2005

Electronic Signature of Signing Officer or Director

Date