## 2005 FOR PROFIT CORPORATION

SIGNATURE: 1

## Apr 02, 2005 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P99000109083 1. Entity Name RACK & AXLES 2000, INC. Principal Place of Business Mailing Address 4265 N.W. 37TH AVENUE 4265 NW 37 AVE. MIAMI, FL 33142 MIAMI, FL 33142 Anna diagram and anna diagram 01222005 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 65-0768509 Not Applicable The State of the S \$8.75 Additional The state of the s 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ELEAZAR, CASTILLO M 4265 N.W. 37TH AVENUE MIAMI, FL 33142 IN THIS SPACE bmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familian with, and accept of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) U00000285146 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 04/02/05-80033-015 tsn..on Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME CASTILLO, ELEAZAR \$77.5 \$1.60 \\ \tag{4.00 \\ \ta 4265 NW 27 AVE STREET ADDRESS MIAMI, FL. 33142 CITY-ST-ZIP TITLE NAME Capture of the state of the state of the STREET ADDRESS miles and the state of the stat CITY-ST-ZIP 3.777 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE was a militarial files and a NAME STREET ADDRESS 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 all other like empowered.

INTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Daytime Phone #