

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000098506

**FILED**  
**Apr 10, 2019**  
**Secretary of State**  
**1729766245CC**

**Entity Name:** OTTAWA TRUCKS CENTER INC.

**Current Principal Place of Business:**

2575 W. STATE ROAD 84  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

2575 W. STATE ROAD 84  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 43-2119492

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WALROTH-SADURNI, STEPHEN P ESQ.  
COLUMBUS CENTER  
ONE ALHAMBRA PLAZA PENTHOUSE  
CORAL GABLES, FL 33134 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:** STEPHEN P. WALROTH-SADURNI, ESQ.

04/10/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name PONCE-GUTIERREZ, ALBERTO  
Address 7227 N.W. 74 AVENUE  
City-State-Zip: MIAMI FL 33166

Title DVP  
Name PONCE-MANZANILLA, JOSE L  
Address 7227 N.W. 74 AVENUE  
City-State-Zip: MIAMI FL 33166

Title DVP  
Name PONCE-DIAZ, JUAN M  
Address 7227 N.W. 74 AVENUE  
City-State-Zip: MIAMI FL 33166

Title DS  
Name CASARES-CAMARA, JOSE M  
Address 7227 N.W. 74 AVENUE  
City-State-Zip: MIAMI FL 33166

Title O  
Name CURRLIN, CARLOS A  
Address 7227 N.W. 74 AVENUE  
City-State-Zip: MIAMI FL 33166

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALBERTO PONCE-GUTIERREZ

**PRESIDENT**

04/10/2019

Electronic Signature of Signing Officer/Director Detail

Date