FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT

CORPORATION '

ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 284216

(9)

1. Corporation I							
EQUIPN	MENT FOR INDUSTRY, INC	,	•				
Principal Place o	of Business	Mailing Address				A BHI BIBII BAHI BIBII	
4661 SW 72ND AVE 4661 SW 72ND AVE MIAMI FL 33155 MIAMI FL 33155							
					3. Date Incorporated or Qualified 08/13/1964	3a. Date of La 01/25/	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-1056928		Not Applicable
Stite, Apt. #		Suite, Apt. #, etc.			5. Certificate of Status Desired	LJ	3.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees
23	Gountry	28	Country		8. This corporation has liability for		
24	25	29	30			s 🔲 No	
	g. Name and Address of Curren	it Registered Agent			10. Name and Address of New I	Registered Agent	l .
			81	Name	SANDRA L. TEST, ESQ		
AGUILERA, ENRIQUE E. 4661 SW 72ND AVE				Street A	odress (P.O. Box Number is Not Accepta 9400 SOUTH DADELAND	BLVD.	
MIAMI FL	_ 33155		83		SUITE 300		
•	•		84	City	MIAMI	FL B5	1 33156
11. Pursuant to	the provisions et Sections 607.0502	and 607.1508, Florida Statute	s, the above-n	amed cor	poration submits this statement for the puopard of directors. I hereby accept the app	rpose of changing	its registered office
or regiptore familianwith	id agent, o both, if the State of Florion, and accept the obligations of Sect	da. Such change was authoriza ion 607.0505 Florida Stavutes	ed by the corpo	ration s o	loard of directors. Thereby accept the app	Minement as regist	ered agent. I am
SIGNATURE	Condi		J. SA.	14	Horney	ر بے	8-96
	Stylicture, typed or print a name of registere Lagonic			signature rec	pared when reinstating?	DATE	OTODO IN 10
12.	OFFICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF	FICERS AND DIRE	
TITLE	std Aguilera, enrique e.	Detter.	1. 1 TITLE 1.2 NAME	1.	Aguilera, Enrique E.	(A) one	inge [] Modified
NAME STREET ACTORESS	881 OCEAN DR., APT. 3-D		1.2 NAME		881 Ocean Dr., APT. 3-	, n	
CITY - ST - ZIP	KEY BISCAYNE FL		1 4 CiTY-ST	- 7IP	Key Biscayne, FL	D	
THE	Р	DELETE	2 1 TITLE		VP .	☐ Cha	inge 🗽 Addition
NAME	AGUILERA, ENRIQUE E	·	2.2 NAME	.	Aguilera, Laura L		
STREET ADDRESS	881 OCEAN DR APT 3-D		23 STREET	ADDRESS	881 Ocean Dr., APT. 3	- D	
CHY SI ZU	KEY BISCAYNE FL		24 CITY- S1	- ZIP	Key Biscayne,FL		
TaToF		DELETE	3 1 TIFLE		VP	Cha	ange 💢 Addition
NAME			3.2 NAME		Gonzalez, Maria S		
STHEE ADDRESS			33 STREET		13232 SW 52 Terrace Miami, FL 33175		
CHY SI-ZIF		DELETE	3.4 CITY - ST 4.1 TITLE	- ZIP I	ritanit, PL 33173	☐ Cha	inge Addition
NAME			4 2 NAME				, <u> </u>
STREET ADDRESS			4 3 STREET	ADDRESS			
CITY-ST ZIF			4.4 CHTY - S1		2000017 -03/15/9001	44932	2
THEF		☐ DELETE	5 1 TITLE		-03/15/960:	1073 0 0 5 ;	nge 🔲 Addition
NAME			5.2 NAME		***200.08		
STREET ADDRESS			53 STREET	SZARDCA			
CITY - S1 - ZIF		P prime	5.4 CITY-S1	- ZiP			Ward -
THEF		☐ DELETE	6 1 TITLE			☐ Cha	ude Talour
NAME			6 2 NAME	* DODE 00			CH P
STREET ADDRESS			63 STREET				1.77
14. I do hereby	certify that the information supplied	with this filing is voluntarily turn	64 CITY-ST ished and does		fy for the exemption stated in Section 119	9.07(3)(k), Florida S	statutes. I further
certify that oath; that I appears in	the information indicated on this annuan an officer or director of the corp. Block 12 or Block 12 in the one	ial report or supplemental ann ration or the receiver or truste an attachment with an addr	ual report is tru e empowered to ess.	e and acc o execute	ry for the exemption stated in Section 11st surate and that my signature shall have the this report as required by Chapter 607, F	same legal effect lorida Statutes; an	as if made under id that my name

SIGNATURES

ENRIQUE E. AGUILERA

1/18/96

(305)662-1513

CR2E034 (