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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 499357

1. Corporation Name

FOTI EQUIPMENT COMPANY, INC.

Principal Place	e of Business	Mailing Address		
5680 NW 161 ST 5680 NW 161 STREET			•	
MIAMI FL 33014	ŀ	MIAMI FL 33014		' DO NOT MOTE IN THIS SPACE
US		U\$		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed 03/19/1976
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-1656547 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 27				rea Kaquicu
		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country		untry	8. This corporation owes the current year Intangible
24	25	29 30		Personal Property Tax.
VI III				10. Name and Address of New Registered Agent
FOTI	ID CTEDITEN		81 Name	FOTI IR STEPHEN
FOTI, JR. STEPHEN			82 Street A	Address (P.O. Box Number is Not Acceptable)
6700 BULL RUN RD			158	
	E 371		83	
MIAN	/II LAKES FL 33014			107, 462
			84 City	IAMI LAKES FL 85 Zip Code 33014
11 Pursuant t	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statutes, the	above-named o	corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
agent. I ar	m familiar with, and accept the obligat	tions of, Section 607.0505, Florida Sta	iutes.	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable /NOTE: Registers	er erutsonis toenå be	equired when reinstating) DATE
12.		D DIRECTORS 13		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD		TITLE	PTD Change Addition
	FOTI, JR S	_	NAME	
NAME	6700 BULL RUN RD #371	· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS	F=T1. JR. 3 15800 BULL RUN RD. #462
STREET ADDRESS				12400 1200 1200 100 100 100 100 100 100 100
CITY-ST-ZIP	MIAMI LAKES FL		CITY-ST-ZIP	MIAMILAKES FL. 33014
TITLE	VSD		rmle	Committee Committee
NAME	FOTI. STEPHEN III		NAME	
STREET ADDRESS	11860 N.W. 13TH ST.	2.3	STREET ADDRESS	and the second of the second o
CITY-ST-ZIP	PEMBROKE PINES FL		CITY-ST-ZIP	
TITLE		☐ DELETÉ 311	TITLE	☐ Change ☐ Addition
NAME		3.2	NAME	
STREET ADDRESS		3.3	STREET ADDRESS	
CITY-ST-ZIP		3.4.	CITY-ST-ZIP	
TITLE		☐ DELETE 4.1	TITLE	☐ Change ☐ Addition
NAME	,	4.2	NAME	
STREET ADDRESS		4.3	STREET ADDRESS	•
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE			TITLE	☐ Change ☐ Addition
			NAME	-
NAME :			STREET ADDRESS	
STREET ADDRESS		5.5		
		EAL	CITY, ST. 71D	
CITY-ST-ZIP			CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

NATIVE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTO

N FOT, JR.) 3/1/9

305-670-6906

CR2E034 (11/98)

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90001 038 ***150.00