2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2001 8:00 am
Secretary of State
02-03-2001 90077 010 ***150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # 499357

1. Entity Name
FOTI EQUIPMENT COMPANY, INC.

Principal Place of Business	Mailing Address
5680 NW 161 ST MIAMI FL 33014 US	5680 NW 161 STREET MIAMI FL 33014 US

2. Principal Place of Business	3. Mailing Address
8272 N.W. SOUTH RIVER DR.	8272 N.W. SOUTH RIVER DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL.	City & State: MIAMI, FL.
Zip: 33166 Country: USA	Zip: 33166 Country: USA

4. FEI Number 59-1656547 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FOTI, JR. STEPHEN
15800 BULL RUN RD
APT 462
MIAMI LAKES FL 33014

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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 ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PTD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FOTI, JR S	NAME	
STREET ADDRESS	15800 BULL RUN RD #462	STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL	CITY-ST-ZIP	
TITLE	VSD ☐ Delete	TITLE	VSD ☑ Change ☐ Addition
NAME	FOTI. STEPHEN III	NAME	FOTI, STEPHEN III
STREET ADDRESS	11860 N.W. 13TH ST.	STREET ADDRESS	4241 HWY. 101 NORTH
CITY-ST-ZIP	PEMBROKE PINES FL	CITY-ST-ZIP	CRESCENT CITY, CA. 95531
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
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TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen Foti Jr. 1/19/01 305-885-1760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

CR2E034 (10/00)