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 #**

(3)

KENDALL EQUIPMENT CORP.

 $\mathcal{C}^{(i)}$

Principal Place of Business Mailing Address

650 NW 120TH STREET MIAMI FL 33168		650 NW 120TH STREET MIAMI FL 33168							
						3. Date incorporated or Qualified 01/26/1979	3a. D	ate of Last Report 01/19/1995	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-2027849		Not Applicable	
Saite, Apt.	#. etc.	Suite, Apt. #	, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
Oity & Stat	· · · · · · · · · · · · · · · · · · ·	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζφ 24	Country 25	Ζφ 29	[Co	untry		8. This corporation has liability for i Florida Statutes Yes		tax under s. 199.032,	
	9. Name and Address of Ci	irrent Registered Agent				10. Name and Address of New R	egistere	d Agent	
				81	Nanie				
LINDO, MAURICIO 19725 NE 24TH COURT				82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
NORTH	1 MIAMI FL 33180			83					
				84	City		F	L 85 Zip Code	
11. Pursuant or register	to the provisions of Sections 607, red agent, or both, in the State of	0502 and 607.1508, Florid Horida, Such change was	a Statutes, the ab	OVO-F	named corpora	ation submits this statement for the pure	pose of o	changing its registered office	

familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

SIGNATURE .	Agration typical or printed name of responsible agent and th	Literatus A OT	L. Regettered Agent signature required	du por control	
12.	OFFICERS AND DIF		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
THE	P	DELETE	1 1 THILE		Addition
NAME	LINDO, MAURICIO		1.2 NAME		
STREET ADDRESS	19725 NE 24TH COURT		13 STREET ADDRESS		
CIY SI-ZP	n. Miami fl		1.4 CHY - \$1 - ZIP		
1111	V	[] DELF1E	2 1 THTLE	☐ Change ☐ A	Addition
NAME:	LINDO, LUCY		2.2 NAME		
SHRELL ADDRESS	19725 NE 24TH COURT		2.3 STHEET ADDRESS		
Oh St.Zir	N. MIAMI FL		2.4 CITY - S* - ZIP		
MIF	Ť	DELETE	3 1 THLE	Change A	Addition
NAMe	LINDO, MAURICE A.		3.2 NAME		
STREET ADDRESS	19725 N.E. 24TH CT		3.3. STREET ADDRESS		
CHY ST ZiP	N. MIAMI FL		3 4 CITY - ST - ZIP		
1 11 f	S	DELETE	4 1 TITLE	Change A	Addition
NAM:	LINDO, SUSAN		4 2 NAME		
STREET ADDRESS	19725 NE 24TH COURT		4.3 STREET ADDRESS		
CHY ST-ZIP	N. MIAMI FL		4 4 CITY - ST - ZIP		
TILE		DELETE	5 1 TITLE	☐ Change ☐ A	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CHY-S1-ZiP			5 4 CITY - ST - ZIP		
1016		DELETE	6 1 TIFLE	Change A	Addition
NAM!			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
Cith ST-ZiP			6 4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or suppliedental annual report is true and accurate and that my signature shall have the same legal effect as if made under onth 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 13 if changed, pir on an attaching it with an address.

SIGNATURE: