2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005416

Name:

Address:

City-St-Zip:

ELEANOR, GIANNETTI

11270 JACANA COURT

FT. MYERS, FL 33908

Entity Name: AM-QUIP SERVICES, INC.

FILED Aug 18, 2009 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	YAL HARBOL S, FL 33908	JR COURT			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	YAL HARBOL S, FL 33908	JR COURT			
FEI Number	: 58-1316950	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	l Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
The above	e of Florida.	US submits this statement for the	e purpose of changing its registered	d office or registered agent, or both,	
	Electro	nic Signature of Registered A	gent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GIANNETTI, B	. HARBOUR COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GIANNETTI, B	. HARBOUR COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	AS () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: BRUCE GIANNETTI PRES 08/18/2009