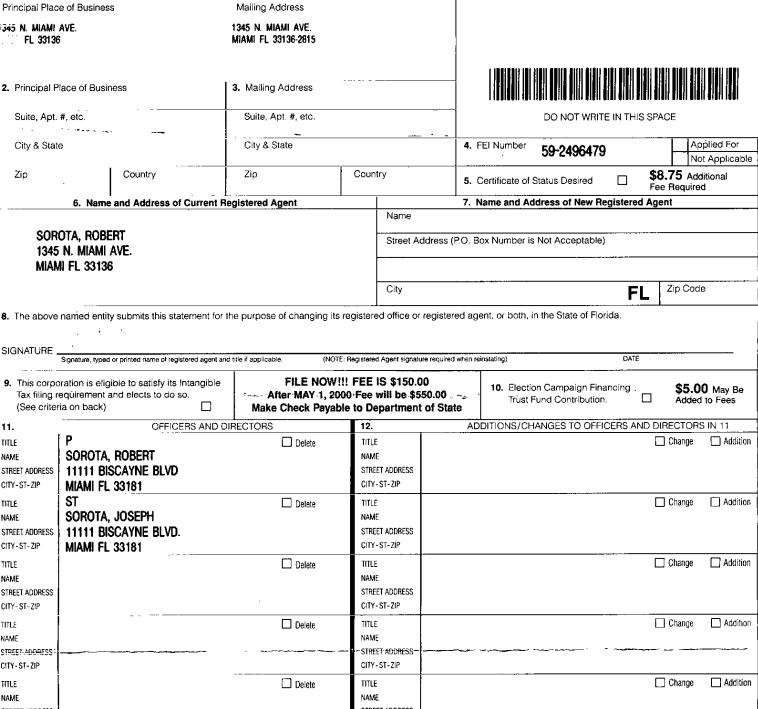
2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # M10644 1. Entity Name ABC SUPPLIES & EQUIPMENT, INC. Mailing Address Principal Place of Business 1345 N. MIAMI AVE. 1345 N. MIAMI AVE. MIAMI FL 33136-2815 FL 33136 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country 6. Name and Address of Current Registered Agent

FILED Jan 24, 2000 8:00 am **Secretary of State**

01-24-2000 90098 027 ***150.00



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 empo

Name

City

FILE NOW!!! FEE IS \$150.00

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12.

STREET ADDRESS

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STREET-ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

SOROTA, ROBERT

SIGNATURE.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIE

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11.

(See criteria on back)

1345 N. MIAMI AVE. MIAMI FL 33136

9. This corporation is eligible to satisfy its Intangible

SOROTA, ROBERT 11111 BISCAYNE BLVD

MIAMI FL 33181

SOROTA, JOSEPH

MIAMI FL 33181

11111 BISCAYNE BLVD.

Tax filing requirement and elects to do so.

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

☐ Addition