

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M50030

FILED
Apr 29, 2008
Secretary of State

Entity Name: A-1 FIRE EQUIPMENT, CORP.

Current Principal Place of Business:

3619 NW 2ND AVE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

3619 NW 2ND AVE
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-1590636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELAND RUSSIN & BUDWICK, P.A.
3000 WACHOVIA FINANCIAL CENTER
200 S. BISCAYNE BLVD., ATTN:MARK S. MELAND
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPEIGEL, EARL
Address: 3619 N.W. 2ND AVE
City-St-Zip: MIAMI, FL 33127

Title: V () Delete
Name: MELAND, RANDY
Address: 3619 NW 2ND AVE.
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: PEREZ-BANEZ, ALEXIS
Address: 3619 NW 2 AVENUE
City-St-Zip: MIAMI, FL 33127

Title: VS () Delete
Name: PEARSON, HOWARD
Address: 3619 NW 2ND AVE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PRICE, EVERTT D
Address: 3619 NW 2 AVENUE
City-St-Zip: MIAMI, FL 33127

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: EARL SPEIGEL

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date