Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90053 029 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000078938

1. Corporation Name

ARMSTRONG EQUIPMENT USA, INC.

Principal Place of Business 8405 N.W. 53RD ST. STE #4112 MIAMI FL 33166 US 2. Principal Place of Business 2. Mailling Address US 2. Principal Place of Business 2. Mailling Address 2. Principal Place of Business 3. Date Incorporated or Qualifed 11/15/1993 2. Principal Place of Business 2. Mailling Address 4. FEI Number 65-05 10653 Suite, Apt. #, etc. 5. Certificate of Status Desired City & State City & State City & State City & State 28 Zip Country Zip Country Zip Country Zip Country Zip Personal Property Tax. 9. Name and Address of Current Registered Agent TIMOTHY CARL BLAKE P.A. CONCORD BUILDING, SUITE 606	Mailing Address 8405 N.W. 53RD ST. STE #4112 MIAMI FL 33166 US 2a. Mailing Address 2b. Land Mailing Address 2c. Land Mailing Address 2c. Land Mailing Address 2d. Mapplied For Mot Applied For Not Additional Fee Required 2d. Suite, Apt. #, etc. Scriticate of Status Desired Status Desired Address of Not Added to Fees Not Added to Fees Not Added to Fees Not Address of New Registered Agent 3d. Suite Country Street Address of New Registered Agent Not Acceptable Street Address (P.O. Box Number is Not Acceptable)	100 (100 (100 (100 (100 (100 (100 (100							
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MIAMI FL 33130	at one as 7 in Code	Principal Place of Business ### Address ### Address of New Registered Agent ### Address (P.O. Box Number is Not Acceptable) ### Address (P.O. Box Number is Not Acceptable)	MIAMI FL 33130		04	Oit.		les 7in C	ode
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered	°1 °0" FL " '	Principal Place of Business ### ### ### ### ### ### ### ### ###							
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's poard of directors, I hereby accept the appointment as registered.	Sections 507 0502 and 507 1508. Florida Statutes the shove named comporation submits this statement for the purpose of changing its registered	Principal Place of Business B405 N.W. S3RD ST. B405 N.W. S3RD ST. B405 N.W. S3RD ST. B405 N.W. S3RD ST. B406 N.W. S3RD ST. B406 N.W. S3RD ST. B407 N.W. S3RD ST. B408 N.W. S3RD ST. B408 N.W. S3RD ST. B408 N.W. S3RD ST. B409 N.W. S48 N.W.	11. Pursuant to the provisions of S	Sections 607.0502 and 607.1508, Florida 5	Statutes, the above-	-named corpor	ration submits this statement for the purpos	se of changing its r	registered
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Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered	Principal Place of Business 8405 NW. SSRD ST. \$405 NW. SSRD ST. \$515 #4112 MIAMI FL 33166 US 2. Principal Place of Business 2. Mailing Address 2. Miaming Address 2. Principal Place of Business 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Date Incorporated or Qualifed 11/15/1993 2. Principal Place of Business 2. Mailing Address 4. FEI Number 65-0510653 Suite, Apt. #, etc. 5. Certificate of Status Desired 7. Status Desired 65-0510653 Suite, Apt. #, etc. 6. Election Campaign Financing 7. Fee Required 6. Election Campaign Financing 85.00 May Be Added to Fees 2ip Country 2ip Country 2ip Country 8. This corporation owes the current year Intangible Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of Now Registered Agent TIMOTHY CARL BLAKE P.A. CONCORD BUILDING, SUITE 606 66 WEST FLAGLER ST. MIAMI FL 33130 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	office or registered agent, or bo agent. I am familiar with, and a	oth, in the State of Florida, Such change \	was authorized by tr	ne contoration	ration submits this statement for the purpor's board of directors. I hereby accept the a	se of changing its r appointment as reg	registered istered
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CITY-ST-ZIP MIAMI FL 1.4 CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE Change Add	Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the obligations of, Section 607.0505, Florida Statutes. Note: Registered Agent signature required when reinstating) DATE	Mailing Address 8405 N.W. 53RD ST. STE #A112 US 2. Principal Place of Business 2. Mailing Address US 3. Data Incorporated or Qualifed 11/15/1993 2. Principal Place of Business 2. Mailing Address 3. Data Incorporated or Qualifed 11/15/1993 4. FEI Number 65-05 10653 Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired City & State 28 City & State 29 City & State 21 City & State 21 City & State 21 City & State 22 City & State 23 24 City & State 25 City & State 26 City & State 27 Country 27 Country 28 Trust Fund Contribution Address of Current Registered Agent TIMOTHY CARL BLAKE P.A. CONCORD BUILDING, SUITE 606 66 WEST FLAGLER ST. MIAMI FL 33130 84 City & Country City & State of Florida: Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florida: Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. In the State of Florida: Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. In the State of Florida: Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida: Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida: Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In the purpose or price arms of registered agent and the repricable. (NOTE Registered Agent expensive required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME ARMSTRONG, LEWIS R 13553 S.W. 58TH ST. CITY-ST-2P Addition 14. FEIT ST-2P Addition 19 Change Addition 19 Change Addition 19 Change Addition 19	office or registered agent, or be agent. I am familiar with, and a SIGNATURE 12. TITLE PD ARMSTRONG, LI STREET ADDRESS CITY-ST-ZIP MIAMI FL TITLE STD	oth, in the State of Florida. Such change to accept the obligations of, Section 607.050 tame of registered agent and title if applicable. OFFICERS AND DIRECTORS DELE EWIS R H ST.	was authorized by tr 5, Florida Statutes. (NOTE: Registered Agent of 13. TE 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST-	ine corporation	when reinstating)	TE Change	RS IN 12
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MIAMI FL	Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the obligations of, Section 607.0505, Florida Statutes. Note: Registered Agent signature required when reinstating)	Mailing Address Mak NW. SIRD ST. SITE #A112 STE #A112 STE #A112 SUB NW. SIRD ST. STE #A112 SUB NW. SIRD ST. SUB NW. SIRD ST. SUB AMAIN FT. 33168 SUB NW. SIRD ST. SUB NW. SIRD SUB	office or registered agent, or be agent. I am familiar with, and a SIGNATURE 12. TITLE PD ARMSTRONG, LI 13553 S.W. 58TH MIAMI FL STD ARMSTRONG, E 13553 S.W. 58TH MIAMI FL STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRES	oth, in the State of Florida. Such change is accept the obligations of, Section 607.050 tame of registered agent and title if applicable. OFFICERS AND DIRECTORS DELE EWIS R H ST. DELE VELYN S H ST.	was authorized by tr 5, Florida Statutes. (NOTE: Registered Agent of 13. TE 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST. TE 2.1 TITLE 2.2 NAME 2.3 STREET A 2.4 CITY-ST. TE 3.1 TITLE 3.2 NAME 3.3 STREET A 3.4 CITY-ST. TE 4.1 TITLE 4.2 NAME 4.3 STREET A 4.5 CITY-ST. TE 5.1 TITLE 5.2 NAME 5.3 STREET A 5.3 STREET	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	TE RS AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
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CITY-ST-ZIP	Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the obligations of, Section 607.0505, Florida Statutes. NOTE: Registered Agent signature required when reinstating)	Mailing Address MoK NW, SSRD ST. STE #A112 MIAMA FT, 23166 US 2. Principal Place of Business 2. Melling Address 2. Melling Address 3. Does incorporated or Qualified 11/15/1998 3. Does incorporated or Qualified 12/15/1998 3. Does incorporated or Qualified 12/15/1998 3. Does incorporated or Qualified 13/15/1998 3. Does incorporated or Qualified 14/15/1998 3. Does incorporated or Qualified 15/15/1998 3. Does incorporated or Qualified 15/15/15/1998 3. Does incorporated or Qualified 15/15/15/15/15/15/15/15/15/15/15/15/15/1	office or registered agent, or be agent. I am familiar with, and a SIGNATURE 12. TITLE PD ARMSTRONG, LI 13553 S.W. 58TH MIAMI FL STD ARMSTRONG, E 13553 S.W. 58TH MIAMI FL STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY	oth, in the State of Florida. Such change is accept the obligations of, Section 607.050	### Was authorized by tr 5, Florida Statutes. (NOTE: Registered Agent 13. TE	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	TE RS AND DIRECTOR Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change ARMSTRONG, LEWIS R 1.1 TITLE ARMSTRONG, LEWIS R 1.2 NAME	Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered	Principal Place of Business ### 8405 N.W. 53RD ST. #	office or registered agent, or ho	oth, in the State of Florida, Such change \	was authorized by tr	ne contoration	ration submits this statement for the purpor o's board of directors. I hereby accept the a	se of changing its r appointment as reg	egistei istered
•••	"	Principal Place of Business ### Additional Str. #### Additional Str. ##### Additional Str. ##### Additional Str. ###################################		ſ.	83			•	
)I. 83	Principal Place of Business ### 8405 N.W. 53RD ST. ### 53165 ### 8405 N.W. 53RD ST. ### 53166 ### 11/15/1993 ### 11/15/1993 ### 11/15/1993 ### 12/15/1993 ### 12/15/1993 ### 12/15/1993 ### 12/15/1993 ### 12/15/1993 ### 12/15/1993 ### 12/15/1993 ### 12/15/1993 ### 11/15/199							
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Principal Place of Business ### A112 ### A112 ### A112 ### A112 ### A113 ### A114 ### Applied For Every Registered Agent ### Applied For Street Address (P.O. Box Number is Not Acceptable) #### Acconcord Place of Business #### A415 #### A416 ### Applied For Street Address #### Applied For Street Address #### Applied For Street Address #### Applied For Street Address (P.O. Box Number is Not Acceptable) ###################################	Mailing Address 8405 N.W. 53RD ST. STE #A112 MIAMI FL 33166 US 2a. Mailing Address 25 Suite, Apt. #, etc. City & State 28 City & State 29 30 Country 29 30 Country 29 30 Country 29 30 CE P.A. SUITE 606 Mailing Address DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE Applied For Not Applicable State of Status Desired Fee Required Fee Required Fee Required Fee Required Fee Required St. Trust Fund Contribution Added to Fees 10 Name Street Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)						l errektede kie kalar kilki arkil arkil arkil arkil arkil		

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

4.9,99