FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P94000043833 (0)

MARTIN EQUIPMENT, INC

FILED Feb 02 1998 8:00am Secretary of State



Principal Place	e or business	Mailing Address					
8954 GALL BLVD P.O. BOX 668 ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33539 US US							
				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					06/13/1994		
2. Principal Place of Business 2s. Mailing Address					4. FEI Number		Applied For
21 440			INESC	LANE	59-3245282		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				_,,,,,	-		5 Additional
-					5. Certificate of Status Desired	•	Required
22					6. Election Campaign Financing		00 May Be
23 Plant City 12 28 PLANT City				2	Trust Fund Contribution	Adde	ed to Fees
Zip 24] 3356	7 Country 45 A	29 335-67 3	Country (514	 This corporation owes or has paid the corporation of the property Tax due June 30. 	urrent year Yes	Intangible No
	9. Name and Address of Current R				10. Name and Address of New Registered	Agent	
MARTIN, JAMES W III 925 STRATFORD MANOR OR 82				Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
BRA	ANDON FL 33510		83				
			84	City		85 Zi	ip Code
				,	F1	-	
11. Pursuant t	to the provisions of Sections 607.0502 a	and 607.1508, Florida Statutes	the abov	e-named corp	poration submits this statement for the purpose	of changing	g its registered
office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
SIGNATIONE .	Signature, typed or printed name of registered agent a	nd title il applicable (NOTE:	Registered Ag	ent signature requi	ired when reinstating) DATE.		
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P	DELÉTE 1.1 TE				L Chang	je [_] Addition
NAME	Martin, James III		1.2 NAME				
STREET ADDRESS	925 STRATFORD MANOR DR		1.3 STREET	ADDRESS			
CITY-ST-ZIP	BRANDON FL		1.4 CITY-5	ST-ZIP			
TITLE		DELETE	2.1 TITLE			☐ Chang	je 🔲 Addition
NAME			2.2 NAME				į
STREET ADDRESS			2.3 STREET	ADDRESS	·		1
CITY-ST-ZIP	•		2. 4 CITY -	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Chang	e Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			[
CITY-ST-ZIP			3.4. CITY -				
TITLE		☐ DEL et e	4.1 TITLE	V. E.		Chang	e Addition
NAME			4, 2 NAME			·	
STREET ADDRESS			4.3 STREET	ADDRESS			ľ
CITY-ST-ZIP			4.4 City - 5				
TITLE		☐ DELETE	5.1 TITLE	'' '' ''		Chang	e Addition
NAME			5.2 NAME			,	
STREET ADDRESS			5.3 STREET	ADDRESS			
l l			5.4 CITY - 5	I			
CITY-ST-ZIP		DELETE	6.1 TITLE)1 - Y(L		Chang	e Addition
TITLE		percit					
NAME			6.2 NAME	4000000			}
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP			6.4 CITY - S	si-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.

(01>)719-1898