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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthami

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000062263 (5)

1. Corporation Name

B&K EQUIPMENT SUPPLY, INC. Principal Place of Business Mailing Address 5941 S.W. 36TH TERRACE 5941 S.W. 36TH TERRACE SLITE A SUITE A FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 3. Date Incorporated or Qualified 3a. Date of Last Report 08/11/1995 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032. Zip Country $Z_{(k)}$ Country Florida Statutes Yes No 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KEATOR, BARWELL S Street Address (P.O. Box Number is Not Acceptable) 82 5941 S.W. 36TH TERRACE 83 FT. LAUDERDALE FL 33312 84 Zip Code City 85 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typica or princio na nei of registere flaginit and title flappicante (NOTE: Registered Agent signature recion OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. [] DELETE TITLE 1.11111.6 KEATOR, BARWELL S 1.2 NAME NAME TAYLDE 5941 S.W.38TH TERRACE #A 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33312 CHY-ST-ZiP 1.4 CHY - ST - ZIP TT DELETE 2.1 T-TLE Change ☐ Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 24 City-ST-ZIP DELETE ☐ Change Addition TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 C+TY + ST + Z)P CITY-S7-7/P Change Addition TITLE DELETE 4 1 TITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE 5 * TITLE Change Addition THLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CHTY - ST - ZIP 54 CITY - ST-ZIP DELETE 6 1 THILE Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 City - ST - ZIP CITY-ST-ZIP

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 trusted empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3/h), Florida Statutes I further

SIGNATURE:

BARR S.

KEATOR

4)30)96

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