

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 197096

4-2-96 (1) 2998 - NC

1. Corporation Name
SEACOAST EQUIPMENT CORP.



Principal Place of Business

7970 N.W. 64TH STREET
MIAMI FL 33166
US

Mailing Address

P. O. BOX 624
MIAMI FL 33152

2. Principal Place of Business

2a. Mailing Address

21	26
22	27
23	28
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25	30

3. Date Incorporated or Qualified 10/25/1956	3a. Date of Last Report 04/11/1995
4. FEI Number 59-0807975	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

JAY, LARRY
7970 NW 64TH ST.
MIAMI FL 33166

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person filing this report

Signature of Agent for Change of Registered Office or Agent

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
PTD	JAY, LARRY	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
7970 NW 64TH ST.			
MIAMI FL			
VSD	JAY, PAUL	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
7970 NW 64TH ST.			
MIAMI FL			
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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		<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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)(k), 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 trustee 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 asterisk.

SIGNATURE: *Larry Jay* LARRY JAY 3-29-96 305-594-4940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Phone #

CR2E034 (12/95)