2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 210485

1. Entity Name AMERICAN G	RINDING & EQUIP	MENT COMPANY, INC	C.		02-10-2003 90	***158.75	
Principal Place of Business 1301 N MIAMI AVE MIAMI FL 33136 2. Principal Place of Business		Mailing Address 1301 N MIAMI AVE MIAMI FL 33136					
		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		*****	4. FEI Number 59-0906745		Applied For Not Applicat
Zip	Country	Zip Country		5. Certificate of Status Desired X \$8.75 Ad Fee Require			
6. Name and Address of Current Registered Agent					7. Name and Address of New Regis	tered Agen	t
GREENE, ROBERT 1301 N MIAMI AVE MIAMI FL 33136				Street Address (P.O. Box Number is Not Acceptable)			
14/11				City FL Zip Code			
8. The polytron in the object of the object	1		ig its register	red office or register	red agent, or both, in the State of Florida.	Tam familia	ar with, and accep
Signatu	ure lyped of the balance of registere	ed agent and title if applicable.	(NOTE: Register	ed Agent signature required	d when reinstating)	DATE	·
FILE N	NOW!!! FEE IS \$150.0	00 l			1		

FILED Feb 10, 2003 8:00 am Secretary of State

Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State			4. FEI Number 59-0906745			7	
<u>_</u>					·			ot Applicable	4	
Zip	Country	Zip	Country	5. (. Certificate of Status Desired 💢 \$8.7		8.75 Ad ee Require	75 Additional Required		
	6. Name and Address of Cu	ırrent Registered Agent			lame and Address of New Ro	gistered A	jent		4	
OFFER	DAREST	-	Nam	e	,					
GREENE, ROBERT			Stree	Street Address (P.O. Box Number is Not Acceptable)					7=	
1301 N MIAMI AVE									4	
MIAMI FL	33136	•								
14711			City			FL Zip Code			1	
8. The took	paned catil, submits this staten	nent for the purpose of changing its	registered offic	e or registered ago	ent, or both, in the State of Flor	ida. I am fa	miliar with,	and accept	1	
the object	Addition to the second of the second				_	11			1	
SIGNATURE .		•			2,	7/03				
JIGNATONE .	Signature typed of high state and of legistere	d agent and title if applicable. (NOTI	E: Registered Agent si	gnature required when re		DATE				
F	ILE NOW!!! FEE IS \$150.0	0			_				1	
After May 1, 2003 Fee will be \$550.00		·I			9. Election Campaign Fina Trust Fund Contribution.			00 May Be of to Fees		
Make Check	Payable to Florida Departm	ent of State			irusi Funu Conanguion	. ⊔	Added	u to rees	ł	
10.	OFFICERS AND DIRECTORS		11.	AD	DITIONS/CHANGES TO OFFI	CERS AND (DIRECTOR	S IN 11	1	
TITLE	P	☐ Delete	TITLE				☐ Change	☐ Addition	[8]	
NAME			NAME	ļ					00	
STREET ADDRESS			STREET ADDRE	SS					8	
CITY-ST-ZIP	MIAMI FL 33136		CITY-ST-ZIP						CR2E034 (10/02)	
TITLE		☐ Delete	TITLE			ļ	Change	Addition	8	
NAME STREET ADDRESS			NAME Street addre	ec						
CITY-ST-ZIP			CITY-ST-ZIP	33						
TITLE		[**] Dalas					Change	☐ Addition	-	
NAME		☐ Delete					Change	☐ Addition		
STREET ADDRESS			NAME STREET ADORE	ss						
- CITY-ST-ZIP			-CHY-SI-ZIP-		<u></u>				-	
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition	1	
NAME			NAME		•		_ •		}	
STREET ADDRESS			STREET ADDRES	SS						
CITY-ST-ZIP			CITY-ST-ZIP							
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NAME			NAME							
STREET ADDRESS			STREET ADDRES	SS						
CITY-ST-ZIP		П.	CITY-ST-ZIP						1	
TITLE NAME		☐ Delete	TITLE			l	Change	☐ Addition		
STREET ADDRESS			NAME STREET ADDRES	ss						
CITY-ST-ZIP			CITY-ST-ZIP	· [
12. Thereby o	certify that the information supplies	d with this filing does not qualify for		stated in Section 1	19.07(3)(i), Florida Statutes 1	further certif	v that the i	nformation	1	
indicated of the corp	on to keep of a supplemental re	port is true and accurate and that mempowered to execute this report	ny signature sha	II have the same le	egal effect as if made under oa	ath: that I am	an officer	or director		

SIGNATURE:

2/7/03

(305)(377-8991)