

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 250271

Entity Name
WIVERSIDE EQUIPMENT CORPORATION



Principal Place of Business
1001 N.W. NORTH RIVER DRIVE
MIAMI FLA, 33142-7027 US

Mailing Address
2945 NW 21ST TERRACE
MIAMI, FL 33142-7027 US



01032006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-0948890** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BABUN, JOSE JESUS
2945 NW TERRACE
MIAMI, FL 33142

DO NOT WRITE
IN THIS SPACE

I, the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS

PD	BABUN, JOSE	3160 NW 14 ST	MIAMI, FL
VSD	BABUN, JOSE JESUS	12711 NW 6 STREET	MIAMI, FL
VTD	BABUN, SARA CRISTINA	9250 SW 69 ST	MIAMI, FL

U00000397075
 01/30/06-80035-007 150.00

DO NOT WRITE
IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jose Jesus Babun V.P. Date: 1-18-06 Daytime Phone #: 3056250490
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR