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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 325465

(3)

B AND D CONSTRUCTION EQUIPMENT INC

Principal Place of Business Mailing Address									-
2560 NORTH BOCA RATOR	WEST FIRST AVE N FL 33431		2560 NORTHWEST FI BOCA RATON FL 334						
						 Date Incorporated or Qualified 01/19/1968 		of Last Re 1/25/199	•
2. Principal Pla	ice of Business	2a	, Mailing Address			4. FEI Number		P	Applied For
21		26				59-1226700			lot Applicable
Suite, Apt. #	ቱ, etc.	27	Suite Apt. #, etc		·	5. Certificate of Status Desired	×	Fee F	Additional Required
Crty & State		28	City & State			6. Election Campaign Financing Trust Fund Contribution		Added	May Be to Fees
Zρ	Country	L.,	Zip	Countr	У	8. This corporation has liability for i		x under s	199.032,
24	25	29	.,	30			□No		
	9, Name and Address of Curr	ent Regis	stered Agent	8	I Name	10. Name and Address of New R	egistered	Agent	
franker.	D DICUADO O						1-2		
Danner,richard o 900 SW 13th St			82	2 Street Add	dress (P.O. Box Number is Not Acceptable)				
	RATON FL 33432			8:	3				
•	_			84	1 City			85 Zip	o Code
					'	ration submits this statement for the pur	FL		
tamiliar wit	ed agent, or both, in the State of Fig th, and accept the obligations of, Sc Signific types or processors of replaced as	etian 607	'.0505, Florida Statule	ized by the cor 98 901: Augsteel Au		and of directors. Thereby accept the appropriate the appropriate and the appropriate a	DATE	registereo	agent. Fan
12.	OFFICERS A			13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	SD		DELETE	1 1 7 111			[Change	☐ Addition
NAME	ZIMMER, WILMA			1.2 NAM					
STREET ADDRESS	900 S W 13TH ST			13 STRE	ET ADDRESS				
CITY - ST - ZIP	BOCA RATON, FL 00000			14 CEY	· ST - ZIP				
TITLE	PD		☐ DELETE	2 1 lif. l	ſ		[Change	☐ Addition
NAME	DANNER, RICHARD O			2.2 NAMI					
STREET ADDRESS	900 S W 13TH ST				ET ADOPESS				
CITY - ST - ZIP	BOCA RATON, FL 00000		רם מנוני	2.4 City	· - ·			Cnange	☐ Addition
TITLE			☐ DELETE	3 1 1 11 11			ł		FT MOUNT
NAME				3 2 NAM					
STREET ADDRESS				3.3 STR	ET ADDRESS				
CITY-ST-ZIP TITLE			DELETE	4 1 317L]	Change	Addition
NAME				4 2 NAM				-	
STREET ADDRESS					ET ACORESS				
CITY-ST-ZIP					-ST-ZIP				
TITLE			DELETE	5 1 111:				Change	Addition
NAME				5.2 NAM	F				
STREET ADDRESS				5 3 STRE	ET ADORESS				
CiTY-ST-ZIP				5.4.01fy	-SI - ZIP			_	
T:TLE			DELETE	€ 1 T TL	F			Change	Addition
NAME.				6.2 NAM	:				
STREET ADDRESS				6.3 STRE	ET ADDRESS				
CITY - ST - ZIP				64 CI7Y	- S* - ZIP				-44,

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 receiver or trusted enipowered 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.

14-29.96 407-891-4649