FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

21

23



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 332916 (6) SOUTHERN CONSTRUCTION EQUIPMENT CO.

Principal Place of Business Mai
6286 PHILLIPS HIGHWAY 62
JACKSONVILLE FL 32216 JA

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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6286 PHILLIPS HIGHWAY JACKSONVILLE FL 32216

FILED Jan 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

 Date Incorporated or Qualified 07/24/1968

59-1219021

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4 FEI Number

Zìp	Country	Zip	Cour	ntry		8. This corporation owes or has	paid the curr	ent year In	tangible	
24	25	29	30			Personal Property Tax due June 30. Yes No				
Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent										
GOYKE, JOHN H					Name					
8150 HUNTERS GROVE ROAD					2 Street Address (P.O. Box Number is Not Acceptable)					
JACKSONVILLE FL				Office Model (1,0, Dox Maribor 15 Not Acceptable)						
				83						
			ļ.,	_				T	0.1	
			['	84	City		FL	85 Zip	Code	
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE										
	OFFICERS AND		13.	Agen	n signature requi	ADDITIONS/CHANGES TO OF		DIDECTO		
12.	PD	DELETE 1				ADDITIONS/CHANGES TO OF	FICENS AND	Change	Addition	
NAME	GOYKE,JOHN H		1.2 NAI							
STREET ADDRESS	COCC DIM LIDE LUCEBRAY			_	ADDRESS					
CITY-ST-ZIP	INCKCONDUITE EI			Y-ST	l					
TITLE	D	DELETE	2.1 TtTL		- 24			Change	Addition	
NAME	AANUE BEAAU ENVE			ME					_	
STREET ADDRESS	AGGG DENETING LINGS BALAN				ADDRESS					
CITY-ST-ZIP	MOVOODBRIDE E			Y-ST						
TITLE		DELETE	3.1 TITL					Change	Addition	
NAME			3.2 NAM	ИE				-		
STREET ADDRESS			3.3 STR	EET A	ADDRESS					
CITY - ST- ZIP			3.4. CIT	Y-\$T	r-ZiP					
TITLE	DELETE 4:			LE				Change	Addition	
NAME			4. 2 NA	ME						
STREET ADDRESS			4.3 STR	EET A	NDDRESS				1	
CITY-ST-ZIP			4.4 Cm	Y-ST	- ZIP					
TITLE		DELETE	5.1 TITL	.E	Ì			Change	☐ Addition	
NAME			5.2 NAN	AE,						
STREET ADDRESS			5.3 STR	EET A	DDRESS				- 1	
CITY - ST - ZIP			5.4 CITY	r-ST-	-ZIP					
TITLE		DELETE	6.1 TITL	Æ				Change	☐ Addition ☐	
NAME			6,2 NAM	ΑE					Ī	
STREET AODRESS			6.3 STR	eet a	LDDRESS					
CITY-ST-ZIP			6.4 Cm	-ST	- ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual perior or director of the corporation of the frequency of the										

THE REQUIRED