

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 335144

(2)

1. Corporation Name

POMPANO FIRE EQUIPMENT INC

Principal Place of Business

Mailing Address

**11 S.W. 5TH CT.
POMPANO BEACH FL 33060
US**

**P.O. BOX 295
POMPANO BEACH FL 33061-7295**



3. Date Incorporated or Qualified

09/17/1968

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TYSON, PAULINE T.
11 SW 5TH CT
P.O. BOX 10975
POMPANO BEACH FL 33061**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
TYSON, PAULINE T.
11 SW 5TH CT
POMPANO BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
MAYS, BLANE A.
1845 SE 6 ST.
DEERFIELD BCH. FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
BOND, A. GORDON
1340 S OCEAN BLVD #201
POMPANO BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BOND, A. GORDON
1340 S OCEAN BLVD #201
POMPANO BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-17-96

(954) 943-1551

CR2E034 (3/96)