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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 566525

(2)

STAR EQUIPMENT SALES & SERVICES, INC.

Principal Place		5	Ma	iling Address	Philubus -						
7208 BISCAYNE BLVD. MIAMI FL 33138  7208 BISCAYNE BLVD. MIAMI FL 33138-5119											
								3. Date Incorporated or Qualified 02/24/1978		ate of Last R /26/1996	leport
2. Principal Pi	lace of Busi	ress	<u> </u>	2a. Mailing Address				4, FEI Number 59-1809386		<b>├</b>	pplied For ot Applicable
Suite, Apt. #, etc				Suite, Apt. #, etc.							Additional
22				27			5. Certificate of Status Desired		Fee Ro	equired	
City & State	0			City & State				6. Election Campaign Financing	_		May Be
23		Country	28					Trust Fund Contribution Added to Fees			
Z <sub>i</sub> p	· — ·		-	├─ <b>┐</b>		nry			has liability for intangible tax under s. 199.032,		
24 25 29 Name and Address of Current Regi			[29] irrent Regist	ered Agent				10. Name and Address of New Registered Agent			
Wil F	N, BARRY					81	Name				
		N ST., STE. 208			\.	82	Over et Andrea	on (C.C. Con Number in New Assessment			
HOLLYWOOD FL 33021							Street Address (P.O. Box Number is Not Acceptable)				
1,00					ļī	83					
					ļ-	B4	City		FL	85 Zip	Code
44 Purcupat I	to the provin	vens of Spetions 607	0502 and 60	17 1508 Florida State	itoe the ab		namod corne	pration submits this statement for the			te registered
office or re	edistered ad	gent, or both, in the S	State of Floric	la Such change was Section 607.0505, f	authorized	l by	the corporation	on's board of directors. I hereby acc	ept the ap	pointment as	registered
SIGNATURE	Signal inc. type:	Lor printed name of registers	d agent and title	it applicable. (NC	OTE: Registered	Agen	nt signature required	d when reinstating)	DATE		
12.		OFFICERS	AND DIREC		13.		····	ADDITIONS/CHANGES TO OFF	ICERS AN		
THTLE	P			DELETE	1.1 TITI	LE				Change	Addition
NAME		R, STEVEN B			1.2 NA	ME					
STREET ADDRESS		200TH LANE					ADDRESS				
CITY-ST-ZIP TITLE	MIAMI, F	L 33178		DELETE	2 1 TIT		- ZIP			Change	Addition
NAME				L.J DELETE	22 NAJ		1			CT Overige	[] \\da(\d)
STREET ADDRESS							ADDRESS				
CITY-S1-ZIP					2 4 00						
TITLE				DELETE	3.1 TITI					Change	Addition
NAME					3.2 NAF	ME	ļ				
STREET ADDRESS					3.3 STF	REET #	ADDRESS				
CHTY - ST - ZIP					3.4. CI1	TY - S1	T-21P				
THILE				☐ DELETE	4.1 TIT		l			Change	Addition
NAME					4. 2 NA						
STREET ADDRESS					ľ		ADDRESS [				
CITY-ST-ZIP				DELETE	4.4 CIT		- ZIP			Change	Addition
TITLE NAME					5.1 III					LL CHANGE	LLJ Addition
SIREET ADDRESS							ADDRESS	•			
CITY-ST-ZIP					5.4 CIT						
TITLE				DELETE	6.1 TiT				<del></del>	Change	☐ Addition
NAME					6.2 NA						
STREET ADDRESS							ADDRESS				
CHY-ST-ZIP					6.4 CIT						
14. I do heret	by certify the	at the information sur	oplied with th	is filing does not que	lify for the	exen	rete and that	in Section 119.07(3)(i), Florida Statu	tes. I furthe	er certify that	the
l am an o' appears i	fficer or dire	ector is the comparation block 13 if comparation	on or the receded, or on an	eiver or trustee empo attachplent with an a	ered to end duress.	xecu	ute this report	my signature shall have the same le as required by Cijapter 607, Florida	Statutes;	and that my	name

SIGNATURE:

VATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/97 305759-2424 Daytime Prone !

**FILED** 

Jan 21 1997 8:00am

Secretary of State