## 2000 UNIFORM BUSINESS REPORT (UBR) FILED May 17, 2000 8:00 am Secretary of State **DOCUMENT # 575082** 1. Entity Name LANKFORD EQUIPMENT COMPANY, INC. 05-17-2000 90851 026 \*\*\*150 00 Mailing Address Principal Place of Business 7010 SW 4TH ST 7010 SW 4TH ST MIAMI FL 33144-2707 **MIAMI FL 33144** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1883237 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LANKFORD AUUOLANKFORD, JAMES B Box Number is Not Acceptable) 7010 SW 4TH STREET MIAMI,FL ABFL 33144 MIAMI urpage of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named bmits this state a DONNA L. DENNIS SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE DONNA LANKFORD DENNIS LANKFORD, DOROTHY J MAME 9405 SW 144 ST. STREET ADDRESS STREET ADDRESS 3309 NORTH INDIAN RIVER DRIVE MIAMI, FL 33176 CITY-ST-7/E CITY-\$T-ZIP FT PIERCE FL 34946 ☐ Delete TITLE ☐ Change ☐ Addition TITLE LANKFORD, ROBERT F. NAME STREET ADDRESS STREET ADDRESS 10471 S.W. 118TH STREET CITY - ST- ZIP CITY-ST-ZIP **MIAMI FL 33176** DOROTHY J. LANKFORD 3309 N. INDIAN RNERDR. Change ☐ Addition Delete TITLE TITLE LANKFORD, RANDY L NAME NAME FT. PIERCE, FL 34946 STREET ADDRESS STREET ADDRESS 7101 S W 59TH STREET CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33143** ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 report or suppliemental 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 required or trustee empowered to exclude his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

TURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

DONNA L. DENNIS

4/25/00

Davdima Phone #

☐ Change

☐ Addition

CR2E034 (9/99)