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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

SUN BELT EQUIPMENT SALES, INC.

FILED Apr 02 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address	- 11-1			{	iji qib il bibik i	// 10 10 10 11 12	(81) (01)(1) (09)
5018 24TH AV P.O. BOX 7530	P. O. BOX 75307 P.O. BOX 75307 TAMPA FL 33675	BOX 75307			DO NOT WRITE IN THIS SPACE				
TAMPA FL 33619 TAMPA FL 33675 US US						3. Date Incorporated or Qualified			
						06/27/1980			
2. Principal Place of Business 28. Mailing Address						l			Applied For
21	W	26 Puite Ant # etc				59-2009906			Not Applicable Additional
Suite, Apt. 6	F, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		—	Required
City & State		City & State				6. Election Campaign Financing		\$5.0	May Be
23		28				Trust Fund Contribution			d to Fees
Zip Country		Zip	Zip Country			8. This corporation owes or has paid the current year Intangible			
24	25 29 30		30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
	g. Name and Address of Curren	t Registered Agent		B1	Name	10. Name and Address of New H	egistered A	rgent	
TRONU, DONNA G.									
% SUN BELT EQUIPMENT SALES INC				82	Street Address (P.O. Box Number is Not Acceptable)				
5018 24TH AVE. S. TAMPA FL 33619				83					
170	NFA FL 33019							1221 2	- On de
				84	City		FL	85 Zij	p Code
office or o	o the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was	authorized	vd t	the corporation	oration submits this statement for the on's board of directors. I hereby according to the contract of the cont	purpose of opt the app	changing pintment a	its registered as registered
SIGNATURE							DATE		
	Signature typed or printed natur of registered age OFFICERS AND		E: Hegislered	Agen	eriupes enutangia tr	ADDITIONS/CHANGES TO OFF		DIRECTO	OBS IN 12
12.	PD			1.1 TITLE		ADDITIONOJOHANGES TO OFF	1021107410	Change	
NAME	TRONU, ROBERT A, JR	_	1.2 NA						
STREET ADDRESS	2902 SPANIEL LANE		1.3 STREET		ADDRESS				
CITY-ST-ZIP	SEFFNER FL		1.4 CI	1.4 CITY - ST - ZIP					
TITLE	STD	☐ DELETE	2.1 Ti	ΙE				Change	e 🔲 Addition
NAME	TRONU, DONNA G	2.3		2.2 NAME					
STREET ADDRESS	2902 SPANIEL LANE				ADDRESS				
CITY-ST-ZIP	SEFFNER FL	T or ere	2. 4 CITY-ST-ZIP		T-ZIP			Chana	a Addition
TITLE	VPD DELETE		3.1 1					L Change	e L Addition
NAME	MATTHEWS III, JOSEPH E. 8421 ORIENT WAY N.E.		3.2 N/		ADDOLCC				
STREET ADDRESS	ST. PETERSBURG FL			3.3 STREET ADDRESS 3.4. CHTY-ST-ZIP					
CITY-ST-ZIP	SI. FEIENSBONS IE	DELETE	4.1 TI		11 - ZIF			Chang	e Addition
NAME		<u> </u>	4. 2 N		1				
STREET ADDRESS			4.3 \$1	REET	ADDRESS				
CITY-ST-ZIP			4.4 CI	TY-\$1	T- ZIP				
TITLE		DELETE	5.1 T I	TLE				☐ Chang	e 🔲 Addition
NAME			5.2 N	ME					
STREET ADDRESS			5.3 S	REET.	address				
CITY-ST-ZIP			5.4 C		T - ZIP			1100	A J J S
TITLE		DELETE	6.1 TI					Chang	je L. Addition
NAME		•	62 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	certify that the information supplied w	with this filling does not gualifu	for the ev	ty-\$1	1-ZIP tion stated in 5	Section 119.07(3)(i). Florida Statutes	I further ce	ertify that	the information
I∎, inereby o	sectors mer me innonnerion arbbiten in	nations ming boos not quality				ball barro the same local offect or	: 4 aa a al a	بطفعه عمام	that I am an