FILED

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90160 036 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCU	MENT # 680770				
1. Corporation	1 Name	•			
DELUXE	EQUIPMENT, CO.				
D: : 10		h 4 - 10 lm - A - 1 - 1			
Principal Place		Mailing Address			
4414 28TH STR BRADENTON FI		P.O. BOX 11390 BRADENTON FL 34282-1390			
US	- 41601	US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualifed	
				08/01/1980	
─ `	lace of Business	2a. Mailing Address		4. FEI Number 36-3073007	Applied For Not Applicable
Suite, Apt.	# atc	Suite, Apt. #, etc.			\$8.75 Additional
22	#, etc	27	-	5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Int	
24	25	29 3		Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered	Agent
SMIT	TH, GILBERT L.		81 Name		
7817 ALHAMBRA DRIVE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
BRANDENTON FL 34209			83	ALL MARKET AND ADDRESS OF THE PARKET OF THE	
			84 City	FL	85 Zip Code
44. Dispused to the previous of Sections 607 0502 and 607 1508. Florida Statutes, the above-named comporation submits this statement for the number of changing its regist					changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's locate or directors. I neterby accept the appointment as registered agent. Lam facilities and accept the obligations of Section 607 0505 Florida Statutes.					
	and accept the congan			3-10	-93
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE: R	legistered Agent signature require		
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PTD CAMEDO E	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, SANDRA E.		1.2 NAME		
STREET ADDRESS	7817 ALHAMBRA DR. BRADENTON FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	VSD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	11: Y-478-857	☐ Change ☐ Addition
NAME	HAYDEN, WENDY D.	C) becere	2.2 NAME		
STREET ADDRESS	4123 PALMA SOLA BLVD.		2.3 STREET ADDRESS	4	
CITY-ST-ZIP	BRADENTON FL		2.4 CITY-ST-ZIP	A Company of the second	
TITLE	0	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, GILBERT L.		3.2 NAME		
STREET ADDRESS	7817 ALHAMBRA DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		3.4. CITY-ST-ZIP	/	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change Addition]
TITLE			5.1 TITLE 5.2 NAME		
NAME STREET ADDRESS			5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		
City-St-ZiP Title		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	i		6.2 NAME		j
STREET ANDRESS			6.3 STREET ADDRESS		

CITY-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 report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS