

2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 SEP -8 AM 10:29

DOCUMENT # F00000000180

1. Entity Name
PLANT EQUIPMENT, INC.



Principal Place of Business

42505 RIO NEDDO
TEMECULA, CA 92589

Mailing Address

42505 RIO NEDDO
TEMECULA, CA 92589

2. Principal Place of Business - No P.O. Box #

42505 RIO NEDDO

3. Mailing Address

42505 RIO NEDDO

Suite, Apt. #, etc.

Suite, Apt. #, etc.



08192009

REIN-P

CR2E098 (1/07)

City & State

TEMECULA, CA

City & State

TEMECULA CA

4. FEI Number

95-2580952

Applied For

Not Applicable

Zip

92590

Country

USA

Zip

92590

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SONNENSCHN, MICHAEL D
1420 ALAFAYA TRAIL, SUITE 101
OVIEDO, FL 32765

7. Name and Address of New Registered Agent

Name NRAI Services, Inc.

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

2731 Executive Park Drive

Suite 4

City

Weston

FL

Zip Code

33331

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

P. Souza

Peter F. Souza

Assistant Secretary

9-3-09

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME FULLER, TIMOTHY J
STREET ADDRESS 42505 RIO NEDDO
CITY-ST-ZIP TEMECULA, CA 92589 ☒ Delete

TITLE CFO
NAME RUTAN, DAVID
STREET ADDRESS 42505 RIO NEDDO
CITY-ST-ZIP TEMECULA, CA 92589 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D
NAME DAVE RUTAN
STREET ADDRESS 42505 RIO NEDDO
CITY-ST-ZIP TEMECULA, CA 92590 ☐ Change ☒ Addition

TITLE D
NAME TOM DARCY
STREET ADDRESS 42505 RIO NEDDO
CITY-ST-ZIP TEMECULA, CA 92590 ☐ Change ☒ Addition

TITLE S
NAME PAULA GRAHAM
STREET ADDRESS 42505 RIO NEDDO
CITY-ST-ZIP TEMECULA, CA 92590 ☐ Change ☒ Addition

TITLE T/ASST. S/CFO
NAME STEPHANE LEGOUT
STREET ADDRESS 42505 RIO NEDDO
CITY-ST-ZIP TEMECULA, CA 92590 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-20-09 9517192120

Date

Daytime Phone #