

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000004467

FILED
Jun 28, 2002 8:00 AM
Secretary of State

Entity Name: ISRAEL TRANSPORT & EQUIPMENT COMPANY

Current Principal Place of Business:

7801 NORTHWEST 53RD STREET
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

7801 NORTHWEST 53RD STREET
MIAMI, FL 33055

New Mailing Address:

FEI Number: 52-2275720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, KARL S ESQ.
190 NE 199TH STREET
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

BROWN, KARL S ESQ.
190 NE 199TH STREET
207
MIAMI, FL 33179 US

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.

SIGNATURE:

06/28/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: GRANT, OWEN
Address: 3481 SW 145TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VC () Delete
Name: GRANT, STEVEN
Address: 3481 SW 145TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: TS () Delete
Name: GRANT, JENNIFER
Address: 3481 SW 145TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D () Delete
Name: GRANT, ANDRE
Address: 3481 SW 145TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OWEN GRANT

PC

06/28/2002

Electronic Signature of Signing Officer or Director

Date