

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Nordham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F01281** (7)

1. Corporation Name

EAST COAST EQUIPMENT RENTAL, INC.



Principal Place of Business

**2202 SW 128 AVE
MIAMI FL 33175**

Mailing Address

**2202 SW 128 AVE
MIAMI FL 33175**

2. Principal Place of Business

21 **2202 SW 128 AVE**

Suite, Apt. #, etc.

22

City & State

23 **MIAMI FL**

Zip

24 **33175**

Country

USA

2a. Mailing Address

25 **2202 SW 128 AVE**

Suite, Apt. #, etc.

27

City & State

28 **MIAMI FL**

Zip

29 **33175**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**FELTON, WILLIAM
2202 S.W. 128TH AVE.
MIAMI FL 33175**

3. Date Incorporated or Qualified

10/10/1980

3a. Date of Last Report

04/25/1995

4. FEI Number

59-2123220

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

William R. Felton

Signature typed or printed name of registered agent

Signature typed or printed name of signing officer or director

3/20/96

Date

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
FELTON, WILLIAM L.
2202 SW 128TH AVE.
MIAMI FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
CRUMPLER, JOHN
2202 SW 128TH AVE.
MIAMI FL**

☐ 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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-ST-ZIP

**6T
CRUMPLER, JOHN
3946 LAKESIDE LANE
PALM BAY FL 32909**

☒ Change ☐ Addition

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY-ST-ZIP

☐ Change ☐ Addition

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY-ST-ZIP

☐ Change ☐ Addition

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY-ST-ZIP

☐ Change ☐ Addition

13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY-ST-ZIP

☐ Change ☐ Addition

13.21 TITLE
13.22 NAME
13.23 STREET ADDRESS
13.24 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.02(3)(g), 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.

SIGNATURE:

William R. Felton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/96

Date

2055520477

Distinctive File #

CR2E034 (12/95)