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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUM 1. Corporation	MENT Name	# F02	7

(8)

TRANSPORTATION EQUIPMENT OF FLORIDA, INC.

Principal Place of Business

Mailing Address

FILED May 19 1997 8:00am Secretary of State



1451 SE 9TH COURT HIALEAH FL 33010			1451 SE 9TH COURT HIALEAH FL 33010-5944				
					3. Date Incorporated or Qualified 10/22/1960	3a. Date of Las	•
2. Principal Pla	ace of Business	2a. Mailing Addre	SS	.,	4. FEI Number		Applied For
21		26			59-2035548		Not Applicable
Suite Ap: #	# elc.	Suite, Apt. #,	etc	-		607	5 Additional
22		27			5. Certificate of Status Desired		Required
City & State	1	City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28			Trust Fund Contribution	☐ Adde	ed to Fees
Z:p	Country	Zıp	Count	ry	8. This corporation has liability for i	ntangible tax unde	rs. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agent	
	Beeck, Peter D		8	1 Name			
	SE 9TH COURT		8	2 Street A	ddress (P.O. Box Number is Not Acceptab	le)	
HIALI	EAH FL 33010		L				
			8	3	•		
			. ا	4 City		85 Z	ip Code
			1	4 Ony		FL	ip 000¢
office or re	o the provisions of Sections 607. egistered agent, or both, in the S n farmar with, and accept the o	tate of Florida. Such chang	e was authorized	by the corpo	reporation submits this statement for the poration's board of directors. I hereby acceptation	urpose of changin of the appointment	g its registered as registered
SIGNATURE							
	Signature, typed or printed name of registere			gent signature (equired when reinslating)	DATÉ	ODC IN 12
12.	DP OFFICE.NS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	Change	
TITLE	VERBEECK, PETER D						te [7] vagition
NAM:	600 N E 36 ST APT T15		1.2 NAM				
STREET ADDRESS	MIAMI FL			ET ADDRESS			
C-IY-SI-ZIP	MIVMI FL	Libra	1,4 Crty		·····	Chanc	e Addition
TITLE	•	☐ DE	1	1		Fin Cusuit	k Manuful
KW.			2.2 NAM	i			
STREET ADDRESS			2.3 STAL	et address			
City - St - ZiP				-ST-ZIP			part
THE		∐ DEI	LETE 3.1 TITLI			Chang	je 🔲 Addition
NAME			3.2 NAM	E [
STREET ADDRESS			3.3 STRI	ET ADDRESS			
CITY - ST - 7IP				-ST-ZIP			
TILE		□ DE	LETE 4.1 TATU			Chan	ge 🔲 Addition
NAME			4. 2 NAM	NE .			
STREET ADDRESS			4.3 STR	ET ADDRESS			
CHTY-ST ZIP			4.4 C(TY	-ST-ZIP			
TITLE		☐ DE		-		Chan	ge Addition
NAME			5.2 NAV	E			
STREET ADDRESS				ET ADDRESS			
CITY - ST - ZIP				- ST- 2IP			
Tiful		DE			· · · · · · · · · · · · · · · · · · ·	Chan	ge Addition
NAME			6.2 NAM	1			
STREET ADDRESS			0.2 IVAN	-			
STREET AUDRESS			6.4.200	CY ADDDCOR 1			
City-St-ZH				ET ADDRESS - ST- ZIP			

r op mereny certify that the information supplied with this filling 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 (7 Block 13 if changes) of on an attat ment with an address.

SIGNATURE: