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

DOCUMENT #

(0)

YANES EQUIPMENT INC.

Principal Place of Business

Mailing Address

FILED Jun 03 1997 8:00am Secretary of State



902 8W 139 CT MIAMI FL 33184	902 SW 139 CT Miami Fl 33184-3047			
US	US		3. Date incorporated or Qualified	3a. Date of Last Report
A D. C.			04/15/1982	03/18/1996
2. Principal Place of Business	2a. Mailing Address) / "T	4. FEI Number	Applied For
21 15725 SW 46 TERR Sulte, Apt. *, etc.	26 15725 SW Suite, Apl. #, etc.	46 IETT.	59-2200488	Not Applicable
22	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 MI AMI F	28 Miami	<u></u>	Trust Fund Contribution	Added to Fees
Zip Country	7ip 2216C	Country	8. This corporation has liability for in	
24 <i>9.3 185</i> 25 9. Name and Address of Current		80	Florida Statutes 10. Name and Address of New Reg	Yes No
	Trogistoroo Agent	81 Name	/ ^	
YANES, NELSON			YANES JOSE	1
902 SW 139 CT		82 Street Add	dress (P.O. Box Number is Not Acceptable	
MIAMI FL 33184		83 157	25 S.W 46 TE	77.
:44				
€		84 City	7, Am)	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502	and 607,1508. Florida Statutes	the above-named cor	rnoration submits this statement for the nu	
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obliga	of Florida. Such change was air	thorized by the cornors	alion's board of directors. I hereby accept	the appointment as registered
SIGNATURE BELKIS H. YAN ES Bignature, typed or printed name of registered agent and till of applicable (NOTE Till glistered Agent signature required when re-restation to the signature registering the				
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECTORS IN 12
TITLE PD	DELETE		PD	Change Addition
NAME YANES, NELSON			LANES, JOSE	_ , _
STREET ADDRESS 902 SW 139 CT		1.3 STREET ADDRESS LE	5725 SW 46 TECC.	8
CITY-ST-ZIP MIAMI FL	^		11Ami , FI 33185	ļ.
TITLE VSD	DELETE			Change Addition
NAME YANES, JOSEFINA		2 2 NAME	Secretary	
902 SW 139 CT		2.3 STREET ADDRESS	Beiris M'YANES	
			5725 SW 46 Terr. 114M: Fl 33185	
TITLE	DELETE	3.1 TITLE	11.037.3	Change Addition
NAME		3.2 NAME		_ , _
STREET ADDRESS		3.3 STREET ADORESS		
CITY-ST-ZIP		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		
TITLE	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	_	5.2 NAME		— · - · -
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-SI-ZIP		5.4 CITY - ST - ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
City-St-ZiP				
14. Loo hereby certify that the information supplied	with this filing does not qualify:	6.4 CHY-SI-7IP	ed in Section 119.07(3)(i) Florida Statutes	I further certify that the

I do needy early that the information surpline with this filing does not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes. 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 trusted 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.