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FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F90567 (1)

1. Corporation Name
ROWLAND EQUIPMENT, INC.

Principal Place of Business

2900 NW 73 ST
8751 W. BROWARD BLVD.
MIAMI FL 33147
US

Mailing Address

2900 NW 73 ST
8751 W. BROWARD BLVD.
MIAMI FL 33147
US

2. Principal Place of Business

21 2900 NW 73 ST
Suite, Apt. #, etc.

22

City & State
23 MIAMI, FL

Zip Country
24 33147 25 US

2a. Mailing Address

26 2900 N.W. 73 ST
Suite, Apt. #, etc.

27

City & State
28 MIAMI, FL

Zip Country
29 33147 30 US

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

07/13/1982

4. FEI Number

59-2198823

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ 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 607.0502 and 607.1508, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PD
STREET ADDRESS LAMBERT, JAMES
CITY-ST-ZIP 9100 SHERIDAN
BROOKFIELD IL

TITLE ☐ DELETE
NAME STD
STREET ADDRESS LAMBERT, DOLORES
CITY-ST-ZIP 9100 SHERIDAN
BROOKFIELD IL

TITLE ☐ DELETE
NAME V
STREET ADDRESS KOZELKA, KENNETH
CITY-ST-ZIP 4230 RAYMOND
BROOKFIELD IL

TITLE ☐ DELETE
NAME V
STREET ADDRESS COBB, JOYCE
CITY-ST-ZIP 2900 NW 73RD ST
MIAMI FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS WAITE, JOSEPH
CITY-ST-ZIP 2700 N.W. 73RD ST.
MIAMI FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James Lambert

1-9-98 301 691-8250

CR2E034 (10/97)