

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003647

**FILED**  
**Apr 01, 2005**  
**Secretary of State**

**Entity Name:** GLOBAL EQUIPMENT MARKETING, INC.

**Current Principal Place of Business:**

23282 COSTA DEL SOL BLVD  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 810483  
BOCA RATON, FL 334810483 US

**New Mailing Address:**

**FEI Number:** 04-3198212

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRALNICK, MARSHALL L  
23282 COSTA DEL SOL BLVD  
BOCA RATON, FL 33433 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CST ( ) Delete  
Name: BEBCHICK, LES L  
Address: 4 VIGUE CIRCLE  
City-St-Zip: FRAMINGHAM, MA 01701

Title: PD ( ) Delete  
Name: GRALNICK, MARSHALL L  
Address: 23282 COSTA DEL SOL BLVD  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: ROY, DENIS R. J  
Address: 66 LONGFELLOW ROAD  
City-St-Zip: SHREWSBURY, MA 01545

**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:

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: MARSHALL GRALNICK

PD

04/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date