SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



AMERICAN EQUIPMENT EXCHANGE, INC.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

(4)

FILED Jul 16 1998 8:00am Secretary of State



	•				
Principal Plac	e of Business	Malling Address	 		II (BDI OIDI) OIDI) BILII DIBII DIBII OIBII IIOI
4450 GULF BLY ST. PETER8BU	/D. #309	4450 GULF BLVD. #309 ST. PETERSBURG FL 33706		DO NOT WRIT	E IN THIS S PACE
_	•			3. Date Incorporated or Qualified	
				04/06/1983	
	lace of Business	2a. Mailing Address	th Ct 11	4. FEI Number	Applied For
21 792	0 55th St. N.	26 1420 55	12 St. N.	59-2979310	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 // / Stat	ellas Park tl	28 PINELAS		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Zip 233'	781 25 7/5 A	29 3378 30	Country	This corporation owes or has particular Personal Property Tax due Juni	
[24]	9. Name and Address of Current F			10. Name and Address of New R	
4450 GULF BLVD.				ess (P.O. Box Number is Not Accepted	
ST. PETERSBURG FL 33706			7920 552 St. N.		
	7		B3		
	•		84 City Pin	iellas Park	FL 85 Zip Code 33781
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 obligation	ons of, section 697.0505, Florid	a Statutes.	are sold of directors. Thereby accept	-4 C
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required) 12. OFFICERS AND DIRECTORS 13.				ked when reinstating) ADDITIONS/CHANGES TO OFF	DATE
TITLE	P	DELETE	1.1 TITLE P 37		Change Addition
NAME	WEBB, JOHN GERARD	Decere	1.2 NAME	WEBB NOHN G.	Z Change Z Addition
STREET ADDRESS	4450 GULF BLVD.		1.3 STREET ADDRESS	NEBB JOHN G. 1920 55% St. N. Pinellas Park F.	
CITY-ST-ZIP	ST PETERSBURG, FL 00000		1.4 CHTY-ST-ZIP	live WAS PARK F	L 33781
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		_ • _
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP	<u>-</u>	
TITLE		L DELETE	4.5 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Observe D Addition
NAME		L_] DELETE	5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP		
TITLE	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		FT Attends T Vacition
STREET ADDRESS			6.3 \$TREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	artifu that the information supplied with th	in filing doon not available for the		ion 110 07/31/i\ Florida Statutas I fudi	par portify that the information

I hereby certify that the information supplied with this filing does not ordalify for the exemption stated in section 119.07(3)(i), Florida Statutes. I turther certify that the information supplied with this filing does not ordalify for the exemption stated in section 119.07(3)(i), Florida Statutes. I turther certify that I am an officer or director of the corporation or the receiver/or trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appear in Block 12 or Block 13 if changed, or on an attachment with an address.