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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G49328 (9)

EQUIPARTS SUPPLY, INC.

FILED Apr 08 1998 8:00am Secretary of State



						IBAN UNUN DIBIH EKERK ONDIN BIBIK BIBIK BODI
Principal Place	of Business	Mailing Address			1 1001111 0011 01111 10100 11110 11100	
C/O LUIS J. RIVERO C/O LUIS J. RIVERO			_			
2845 S.W. 69TH COURT		2845 S.W. 69TH COURT MIAMI FL 33155		DO NOT WRIT	DO NOT WRITE IN THIS SPACE	
MIAMI FL 33155		mirtimi FE 33133			3. Date Incorporated or Qualified	
					07/08/1983	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2301878	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		Zip Country		Trust Fund Contribution	Added to Fees	
Žip	Country	Zip		нгу	This corporation owes or has personal Property Tax due Jul	
24	9. Name and Address of Currer	29	30		10. Name and Address of New i	
Date		it ingistored regent		81 Name		
	ERO, LUIS J					
2845 SW 69 CT MIAMI FL 33155			82 Street Ad		Address (P.O. Box Number is Not Accept	able)
MIAMI PL 33135			1	83	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			ĺ			
				B4 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607 1508, Florida Sta	tutes, the at	ove-name	corporation submits this statement for the	purpose of changing its registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change wa jations of, Section 607.0505,	s authorized Florida Stat	d by the co utes.	poration's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE	Signature, typod or printed name of registered ag	The second selection of the se	NOTE: Posietare	Anont rionalis	e required when reinstating)	DATE
12.		ID DIRECTORS	13.	Agent signatu		FICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 10	TLE		Change Addition
NAME	GONZALEZ, VICTOR E.		1,2 NA	AME		
STREET ADDRESS	1855 SW 1 ST., #301		1.3 ST	REET ADDRESS		18
CITY - ST - ZIP	MIAMI FL			TY-ST-ZIP		
TITLE	S	DELETE	2.1 Ti			☐ Change ☐ Addition ☐
NAME	GONZALEZ, MARCIA		2.2 N/	AME		1
STREET ADDRESS	13933 SW 10 ST.		2.3 ST	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.40	ITY-ST-ZIP	1	
TITLE	D	DELETE	3.1 TI	TLE		Change Addition
NAME	RIVERO, LUIS J.		3.2 N/	AME		
STREET ADDRESS	2845 S.W. 69TH COURT		3 3 S1	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4. C	ITY-ST-ZIP		
TITLE		☐ DEL€1E	4.1 TI	TLE		Change Addition
NAME			4. 2 N	IAME		1
STREET ADDRESS			4.3 S1	TREET ADDRESS	1	
CITY-ST-ZIP		<u> </u>	4.4 C	ITY-ST-ZIP		
TITLE		DELETE	5.1 TI	TLE		Change Addition
NAME			5.2 N	AME		ļ
STREET ADDRESS			5.3 S	TREET ADDRESS		İ
CITY-ST-ZIP			5.4 C	ITY-ST-ZIP		
TITLE		DELETE	6.1 TI	TLE		Change Addition
NAME			6.2 N	AME		
STREET ADDRESS			6.3 S	TREET ADDRESS		1
CITY-ST-ZIP				ITY - ST - ZIP	<u></u>	
d4 Ibasebus		with this filing door not quali	he for the ex	amption eta	ted in Section 119 07(3)(i) Florida Statutes	I further certify that the information. I.

I nereby 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 on an attachment with an address.

Marcia Conzole2