FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY 23 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G49736 (3)

1. Corporation Name
THOMAS MACHINERY, INC.

Principal Place of Business	Mailing Address
5680 NW 161ST STREET MIAMI FL 33014	5680 NW 161ST STREET MIAMI FL 33014

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/21/1983
3a. Date of Last Report: 03/29/1994

2. Principal Place of Business 21
2a. Mailing Address 26
Suite, Apt. #, etc. 22 / 27
City & State 23 / 28
Zip 24 / Country 25 / Zip 29 / Country 30

4. FEI Number: 59-2313928 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

MORGAN, CHARLES O., JR., ESQ.
1300 NW 167TH STREET
MIAMI FL 33169

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	P/D	☒ Change ☐ Addition
NAME	HENEGAR, VERNON B.	12 NAME	HENEGAR, JAMES R.	
STREET ADDRESS	15508 MIAMI LAKEWAY N102	13 STREET ADDRESS	4850 S.W. 52ND STREET	
CITY-ST-ZIP	MIAMI LAKES FL	14 CITY-ST-ZIP	DAVIE, FL 33314	
TITLE	SD	21 TITLE	V/D	☒ Change ☐ Addition
NAME	HASKELL, WILLIAM B.	22 NAME	HASKELL, WILLIAM B.	
STREET ADDRESS	11830 NE 6TH AVE.	23 STREET ADDRESS	11830 N.E. 6TH AVENUE	
CITY-ST-ZIP	BISCAYNE PARK FL	24 CITY-ST-ZIP	BISCAYNE PARK, FL 33161	
TITLE	VD	31 TITLE	T/S	☐ Change ☒ Addition
NAME	HENEGAR, JAMES R.	32 NAME	HENEGAR, JACK	
STREET ADDRESS	16501 BRIDGE END ROAD	33 STREET ADDRESS	8321 N.W. 18TH STREET	
CITY-ST-ZIP	MIAMI LAKES FL	34 CITY-ST-ZIP	PEMBROKE PINES, FL 33024	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

$ 87.50

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 R. Henegar 5-18-95 305-625-7878
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0084976 CP