## **2006 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # H33590 1. Entity Name EQUIPMENT SPECIALISTS, INC.

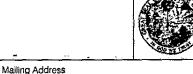
**FILED** Apr 24, 2006 08:00 AN Secretary of State

Principal Place of Business

310 US HWY 17 92W

SIGNATURE:

SUITE 125 HAINES CITY, FL 33844 US



SUITE 125 HAINES CITY, FL 33844 US



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

P 0 BOX 929

04202006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2480355 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

GORDON, MICHAEL 310 US HWY 17-92 W HAINES CITY, FL 33844

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the plans of registered agent.	urpose of changing its regis	tered office or r	egistered agent, or bo	oth, in the State	e of Florio	la. I am f	amiliar v	vith, and	accept
SIGNATURE_				- <u>\$</u>	9-			`	<u></u>	
	Signature, typed or printed name of registered agent and title it	l applicable. (NOTE, Regis	tered Agent signature	required when reinstating)	12.38		DAYE	١.	<u></u>	<u> </u>
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Fit Trust Fund Contribution		\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOT GORDON, BEVERLY G 9114 GREAT HERON CIRCLE ORLANDO, FL 328365485			<b>7</b> 00			30102			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GORDON, MICHAEL H 9114 GREAT HERON CIRCLE ORLANDO, FL 328365485		<u>.</u>		05/05/	(î <i>P-</i> Ri	<u> </u>	<u> </u>	15 <b>8.</b> f	<u>.</u> <u></u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS GORDON, JEREMY A 8848 GREY HAWK POINTE ORLANDO, FL 32836			DO	NOT	WF	RITE	Ξ		
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of the cor	certify that the information supplied with this fill on this report or supplemental report is true a poration or the receiver or trustee empowered, or on an attachment with an address, with all	d to execute this report as re	exemptions co mature shall ha quired by Chap	ntained in Chapter 11 ve the same legal effe ster 607, Florida Statut	9, Florida Stated as if made tes; and that m	tutes, I fu under oa ny name a	orther cert th; that I a appears I	ify that am an of a Block	he inform ficer or d 10 or Bio	nation irector ck 11 if

Jeremy