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 #

(3)

ABLE BUILDERS EQUIPMENT, INC.

Principal Place of Business					Mailing Address					
7451 NW 63 STREET					7451 NW 63 STREET					
MIAMI FL 33166-3603				MIAMI FL 33166-3603						
US				U\$						DO NOT WRITE IN THIS SPACE
										3. Date Incorporated or Qualified
O District Discout D					2a. Mailing Address					02/04/1986 4. FEI Number Applied For
2. Principal Place of Business					⊢ Ť					7,550.00
Sulte, Apt. #, etc.					Suite, Apt. #, etc.					59-2729487 Not Applicable
22					27					5. Certificate of Status Desired See Regulred \$8.75 Additional Fee Regulred
City & State					City & State					6. Election Campaign Financing \$5.00 May Be
23					28					Trust Fund Contribution Added to Fees
Zip	Country				Zip Cou			у		8. This corporation owes or has paid the current year Intangible
24	25			29	29 30			,		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren			t Regi						10. Name and Address of New Registered Agent
FRI	EEDMAN, S	STA	NFORD W.				81	Ti	Name	
7451 NW 63 STREET								+	Street Addre	ess (P.O. Box Number is Not Acceptable)
MIAMI FL 33168								Ι`	Olieet Moure	000 (1.0. DOX NOTIDE: 15 NOT MOCEPHANIE)
••••							83	1		
•							-	1		[az] 7% O. d.
							84	Ί'	City	FL 85 Zip Code
11. Pursuant t	to the provis	ions	of Sections 607.050	and 6	307.1508, Florida St at	tutes, the	e abov	e-r	named corpo	oration submits this statement for the purpose of changing its registered
office or re	e giste red ag m fam ilier wi	ent, th. a	or both, in the State nd accept the obliga	of Flori dions o	ida. Such change wa of. Section 607.0505.	is author Florida !	rized by Statute	yth s.	ne corporation	on's board of directors. I hereby accept the appointment as registered
SIGNATURE					.,,					ľ
SIGNATURE	Signalure, typed	or pro	nled name of registered age	nl and titi	e if applicable (N	NOTE Regis	stered Ag	ent :	signature require	ed when reinstating) DATE
12.			OFFICERS AND	DIRE			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDT PDT			☐ DELETE		1.1 TITLE			Change Addition	
NAME			, STANFORD W.			1	.2 NAME			
STREET ADDRESS					1.3 \$1			T AD	DRESS	
CITY-ST-ZIP	MIAMI F	·L_				1	.4 CITY-S	ST-Z	ZIP	
TITLE			☐ DELETE			2.1 TITLE			Change Addition	
NAME						2	2 NAME			
STREET ADDRESS						2	3 STREET	T AD	ORESS	
CITY-ST-ZIP						_	4 CITY-	ST-	ZIP	
TITLE					DELETE		1.1 TITLE			Change Addition
NAME							.2 NAME			
STREET ADDRESS						3	.3 STREET	T AD	DRESS	
CITY-ST-ZIP					T OFFER	_	4. CITY-	ST-	ZiP	
TITLE					DELETE	1	.1 TITLE		1	Change Addition
NAME						4. 2 N			ŀ	}
STREET ADDRESS							3 STREET			
CITY-ST-ZIP	 -				DELETE		4 CITY-5	ST - Z	ZIP	Channe
TITLE					☐ DELET E		A TITLE			Change Addition
NAME							.2 NAME		1	
STREET ADDRESS							3 STREET		1	
CITY-ST-ZIP					DELETE		4 CITY-S	ST - Z	7(P	Cho Cladre
TITLE					DELETE	- 1	1 TITLE			☐ Change ☐ Addition
NAME							2 NAME			
STREET ADDRESS						6	3 STREET	[AD	DRESS	

14. Thereby certify that the information supplied with this tiling 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 file economic 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 only in plachment with an address. 3/20/02

205.500 KOUN

FILED

Apr 07 1998 8:00am

Secretary of State