## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT** # 1. Corporation Name

(3)

CHUCK'S EQUIPMENT RENTALS, INC.

Principal Place of Business Mailing Address 7350 NV/ 77TH ST P.O. BOX 660344										
<b>#52</b>		MIAMI SPRINGS FL 3	3266-7344							
MIAMI FL 33166 US		US	05			3. Date incorporated or Qualified 3a. Date of Last Report 04/20/1995			eport 995	
2. Principal Piac	ce of Business	2a. Mailing Address				4. FEI Number 59-2719000		<b></b>	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			May Be	
<b>23</b> Zip	Country	Zip	Cou	ntry		8. This corporation has liability fo	r intangible	tax under s	199.032,	
24	25 29		30			Florida Statutes				
1	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New	Registere	d Agent		
				81	Name					
TUFIK, 7350 N			82	Street Addr	ess (P.O. Box Number is Not Acceptable)					
	Y FL 33166			В3						
				84	City		F	L 85 Z	ip Code	
or registere familiar wit	o the provisions of Sections 607.05 ed agent, or both, in the State of Fi- th, and accept the obligations of, Sr Signature typed or printed name of registered at	onda. Such Change was authorized ection 607.0505, Florida Statutes			OTERIOT S DOG	ration submits this statement for the p rd of directors. I hereby accept the ap	DATE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTO	ORS IN 12	
TITLE	P	☐ DELETE	1,17	ITLE				Change	Addition	
NAME	Turk, Abner, I.		1.2 N	AME						
STREET ADDRESS	7350 NW 77TH ST.		135	TAEET	T ADDRESS					
CITY-ST-ZIP	MIAMI FL		1.4 0	)TY-	ST-ZIP				Free Address	
TITLE	D	☐ DELETE	2.11	TITLE				☐ Change	Addition	
NAME	RICHARD TURK		2 2 N	AME	Į					
STREET ADDRESS	7350 NW 77TH ST		235	IREE	T ADDRESS					
CITY - ST - ZIP	MIAMI FL		_	_	ST-ZIP			☐ Change	Addition	
THILE		☐ DELETE	3 1 1							
NAME			3.2 N						İ	
STREET ADDRESS					T ADORESS					
CITY-ST-ZIP		DELETE		JUY- TUTLE	ST-ZIP			☐ Change	Addition	
TOTLE				NAME				_		
NAME					ADDRESS 1					
STREET ADDRESS										
CHY-ST-ZIP		☐ DELETE		4.4 CITY-ST-ZIP 5 1 TITLE			.,	☐ Change	Addition	
TITLE NAME		<b>—</b>		NAME	1					
1					ET ADDRESS					
STREET ADDRESS			i i		ST-ZIP					
CITY-S1-ZIP TITLE		☐ DELETE		TITLE				☐ Change	e 🔲 Addition	
NAME			6.2	NAME	.					
STREET ADDRESS			63	STREE	ET ADDRESS					

€ 4 CITY - ST - ZIP

SIGNATURE:

MONATURE AND TAPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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 13.11 changed, or on an attachment with an address. 4-17-96 PPJ-4123

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CR2E034 (12/95)