2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J51031

Entity Name: PILE EQUIPMENT, INC.

KATZ, NOEMÍ Ń

1743 PAPAYA DR.N

ORANGE PARK, FL 32073

Name:

Address:

City-St-Zip:

FILED Feb 20, 2009 Secretary of State

Littly Na	ille. FILE EQ	OIFIVILIVI, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	AND AVENUE OVE SPRING	E S, FL 320438361 US			
Current Mailing Address:			New Mailing Address:		
	AND AVENUE OVE SPRING	E S, FL 320438361 US			
FEI Number	: 59-2766568	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
208 RIVER	J. MICHAEL R PLANTATIO STINE, FL 32				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ELLIOTT, JOH	ANTATION DR S	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RUTLAND, MA	SS LAKES DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FARMER, RIC	ANTATION RD. N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	TSD () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MARK A. RUTLAND CD 02/20/2009