## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # IR1

J81165

(9)

DOUBLE H EQUIPMENT, INC.

## FILED Oct 01 1998 8:00am Secretary of State

Principal Place of <b>Bus</b> iness Mailing Address						- Produkt dies hind hoof inde dies biil ein ein die bijk ein besk bidd lost	
5400 SW 164 TERRACE 5400 SW 164 TERRACE							
FT. LAUDERDA		FT. LAUDERDALE FL 33331					
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address					07/01/1987 4. FEI Number	Applied For	
21	26				59-2832499	Not Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc.					577	\$8.75 Additional	
22 27					5. Certificate of Status Desired	Fee Required	
City & Stat	e	City & State	ity & State		6. Election Campaign Financing	\$5.00 May Be	
23	23 28				Trust Fund Contribution	Added to Fees	
Zip	Country Zip Cou		Count	ry	8. This corporation owes or has paid the current year intangible		
24	25 29 30		30	Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	nt Registered Agent	-	1 Name	10. Name and Address of New Register	red Agent	
HEWETT, JOHN				1 Name			
5400 SW 164 TERRACE			É	2 Street Ad	ress (P.O. Box Number is Not Acceptable)		
FT. LAUDERDALE FL 33331			-	3			
			8	3			
1			8	4 City		85 Zip Code	
				1		FL 183 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							
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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	Ageni signature ri	required when reinstating) DAT  ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	DELETE	1.1 TITLE		ADDITIONAL TO STATE OF THE STAT	Change Addition	
NAME	HEWETT, JOHN		1.2 NAM			C Change C Addition	
	STREET ADDRESS 5400 SW 164 TERRACE		1.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP				
TITLE			2.1 TITLE			Change Addition	
NAME			2.2 NAME	<u> </u>		onange reconen	
STREET ADDRESS	man & Assi and memory		2.3 STREET ADDRESS			-	
CITY-ST-ZIP			2.4 CITY-ST-ZIP				
TITLE	S	DELETE	3.1 TITLE			Change Addition	
NAME	HEWETT, JACKIE	.—	3.2 NAME	:			
STREET ADDRESS	5400 SW 164 TERRACE		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-	ST-ZIP		·	
TITLE	<del>-</del>	DELETE	4.1 TITLE			Change Addition	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		<del></del>	5.4 CITY-				
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		M 1 - F0	6.4 CITY-	ST-ZIP	440.07(0)(0.5)	12. 10 -1 (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	

4. I hereby certify that the information supplied with this filing 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.

INTERNAL PROPERTY CONTROLLS

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