	PI FA	SE READ A	I INST	RUCTIONS	BEFORE (COMPLETI	NG THIS F	ORM.		
				A DEPARTME	NT OF STATE			· · · · · ·		
, FOR			Katherine Harris Secretary of State				CTII			
DOC!		K1750		IVISION OF CORPO	RATIONS		• •			
DOCUMENT # K17501 1. Corporation Name						ļ	99 OCT 19	9 PH 2: 15	<u>;</u>	
EQUATOR CONSTRUCTION CORPORATION							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
			Mailing Address				ı ilkin idədi binic dahəli	CI DI BIBNI BIDN BIDNI BIL	in eith thau ith	
BUSHINELL FL 99519			BUSHINELL FL 335T3							
						1				
	ddresses are incorrect incipal Office Address, If				ormation and enter correction below. Office Address, If Applicable 4. Date Inc.			prorated or Qualified		
Suite, Apt. #, etc. # 120 Suite, Apt. #				etc.	Y Kd	To Do Busin	To Do Business in Florida 03/09/1988			
City & State Proposition City & State				470	eff	59-2875229 Not Applicable				
Zip	Country	SOFINEE	Zip	Countr	CIRE -	6. CERTIFICATI	OF STATUS DESIR		itional Fee required dificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)										
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director		n r	City / State / Zip			
PT	LARKIN, LEO			96 CR-536			BUSHNELL FL			
V	CAMACHO, JOHN			P.O. BOX 10 N/A			BUSHNELL FL 0			
	<u></u>						 			
				<u> </u>			<u> </u>			
					* **				150.00	
					1 30) 	9. Name and Address of New Registered Agent			
	8. Name and Address of Current Registered Agent Name						Address of New R	egistered Agent		
LARKIN, LEO 84 OR 536					Street Address (P.O. Box Number is Not Acceptable)					
BUSHA	ELL FL . 33513				Suite, Apt. #, Etc. # 472					
					City / L	Puns	soft bee	State Zip C	ode	
_	appointed the registere	ed agent of the above	named corp			obligations of Secti	on 607.0505, F.S.			
Signature o Registered		REG	ISTERED AC	ENT MUST SIGN			Date			
this rein owed by	that I am an officer or d statement application, t y the corporation have t application is true and a	he reason for dissolute name had been paid and the na	tion has beer mes of Individ	n eliminated, the corp duals listed on this fo	orate name satisfier m do not qualify for	s the requirements r an exemption un	of section 607.046	01 or 617-0401, F.S	S., that all fees	
SIGNAT	URE: BIGNATURE	AND TYPED OR PRINT LCO L.	ED NAME OF	SIGNING OFFICER OR	DIRECTOR	5	/0-/4- 44 Date	352 - 74 Daytime Pi	3-93/3 hone #	

Equator Construction Corporation 1910 N County Rd #470 Lake Panasoffkee, FL 33538

10/19/99

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Reference Number K17501

To Whom it May Concern,

In regards to your letter dated July 8, 1999 (See Attached) I had several conversations with Tyrone in your reinstatement department about our corporation. We had not received your annual report package for Equator nor for our other corporation Cable Development Corporation. Through my conversations with Tyrone, he instructed me to write a letter explaining this and include payment for both corporations. It was my limited understanding that one letter would suffice for both companies. As a result, Cable has been reinstated, but Equator has not.

I have attached a copy of the letter I sent for Cable, a copy of your letter, and our completed application. Your department has already received our payment. On behalf of Equator Construction Corporation, I am requesting that you waive the penalty since I have made every effort to comply with your regulations. Although I have made a number of mistakes, I have attempted to meet your requirements in a timely manner.

Your attention to this matter is appreciated. Thank you.

Sincerely, Leo Lukin

Leo L. Larkin,

President