FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Feb 06 1997 8:00am

Secretary of State

(96/6)

E884

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K18246

F. C. EQUIPMENT & PARTS INC.

information indicated on this applicable fam an officer or director of appears in Block 12 or Blo

SIGNATURE:

Principal Place of Business Mailing Address 5975 NW 79 AVE 5975 NW 79 AVE MIAMI FL 33166-3517 MIAMI FL 33166 3. Date Incorporated or Qualified 3a. Date of Last Report 03/16/1988 02/27/1996 2. Principal Place of Business 4. FEI Number 26. Mailing Address Applied For 65-0077969 Not Applicable 26 Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 30 Florida Statutes 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CORREDERO, FRANCISCO 5975 NW 79 AVE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33166** 83 84 Zip Code 85 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 agent it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tide if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition TITLE DELETE 1.1 TITLE CORREDERO, FRANCISCO 1.2 NAME NAME 5975 NW 79 AVE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33166** 1.4 CITY - ST - ZIE CITY - ST - 71F DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - 7/P DELETE Change Addition THLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-SI-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City-St-ZiP CITY - S1 - ZIP DELETE Change Addition 5.1 TITLE THEF NAME 52 NAME STREET ADORESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 DITY-ST-ZIP Addition DELETE ☐ Change 61 TITLE TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP o supplied with this filing does not qualify port or supplemental annual report is to the receiver or trustee empore for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and accurate and that my signature shall have the same legal effect as if made under oath; that red to execute this report as required by Chapter 607, Florida Statutes; and that my name