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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Mar 11 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K40047

appears in Block 12 or Block 13 if

SIGNATURE:

(8)

NEFF MACHINERY, INC.

Mailing Address Principal Place of Business 4343 NW 76 AVE. 4343 NW 76 AVE. MIAMI FL 33168-6415 MIAMI FL 33168 3a. Date of Last Report 3. Date Incorporated or Qualified 10/20/1988 04/04/1996 Applied For Principal Place of Business 2a. Mailing Address 65-0083839 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing **Trust Fund Contribution** Added to Fees 28 23 Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent B1 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 83 Zip Code 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent a greature required when reinstating) Signar are ity test or printed name of regimers diagent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ■ DELETE Change Addition 1.1 TITLE THILE 1.2 NAME NAME MAS. JORGE 1.3 STREET ADDRESS STREET AUDRESS 4343 NW 76 AVE 1.4 CITY-ST-ZIP MIAMI FL 33166 City - St - ZIP Change Addition DELETE 2.1 TITLE THU **DPTS** 2.2 NAME NAME FITZGERALD, KEVIN P. 2.3 STREET ADDRESS 4343 NW 76 AVE. STREET ADDIRESS 2. 4 CITY - ST - ZIP MIAMI FL 33166. CHTY-ST-205 Change Addition Addition DELETE 3.1 TITLE HILE 32 NAME NAME 33 STREET ADDRESS STREET ADDRESS 34. CITY - ST - ZIP DITY-SE ZE Change Addition DELETE 4 1 TITLE 100 F 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHTY - ST - ZIF DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-2IP CHTY-ST ZIP Addition Change DELETE 6.1 TITLE THUE 6.2 NAME NAME: **63 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP City - ST - 7iP 14. Lob 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