May 05, 1999 8:00 am Secretary of State

05-05-1999 90072 010 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M34489

1. Corporation Name

G & J EQUIPMENT CORP.

Principal Place	e of Business	Mailing Address		(   Mail Dir 180 (111) Aidir Binn inite init Aini		
And N. W. Co.	# 8589 NW 54 SC.	<b>6889</b>	NW 54 SE			
MIAMI FL 3316		MIAMI FL 33166			00405	
US .		US		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		ĺ
				06/30/1986		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Арр	olied For
21		26		59-2698762	<del></del>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	
22		27		3. Octional of Planta Boomso	Fee Rec	quired
City & State	e	City & State		6. Election Campaign Financing	\$5.00	
23		28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In		_
24	25	29 30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	d Agent	
			81 Name			
PER	REZ, JOSE F.		82 Street Ad	dress (P.Q. Box Number is Not Acceptable)		
434	1 S.W. 138TH CT.		oz Sueet Au	uless (F.O. Box (40)) box 13 frot Accopiable)		
MIAMI FL 33175			83			
					T1"=-"=	
			84 City	FI	85 Zip C	ode
office or r	registered agent, or both, in the State :	of Florida. Such change was auth	orized by the corpora	rporation submits this statement for the purpose c tion's board of directors. I hereby accept the appo	ointment as reg	istered
office or r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by the corpora a Statutes.	non's board of directors. Thereby accept the appr	ointment as reg	pistered
agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obliga Signature, typed or printed name of registered agen	of Florida. Such change was auth tions of, Section 607.0505, Florida et and title if applicable. (NOTE: Re	orized by the corpora	tion's board of directors. Thereby accept the apprint	Ollithetic as reg	istered .
agent. I a SIGNATURE 12.	registered agent, or both, in the State im familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by the corpora a Statutes. gistered Agent signature requ	non's board of directors. Thereby accept the appr	Ollithetic as reg	istered .
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agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State rim familiar with, and accept the obligation of the obligation	of Florida. Such change was auth tions of, Section 607.0505, Florida int and title if applicable. (NOTE: Re ID DIRECTORS	orized by the corpora a Statutes.  gistered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	tion's board of directors. Thereby accept the apprint	AND DIRECTOR	RS IN 12
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agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State rim familiar with, and accept the obligation of the obligation	of Florida. Such change was auth tions of, Section 607.0505, Florida int and title if applicable. (NOTE: Re ID DIRECTORS	orized by the corpora a Statutes.  gistered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	tion's board of directors. Thereby accept the apprint	AND DIRECTOR	RS IN 12
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agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State arm familiar with, and accept the obligation of printed name of registered agent OFFICERS AN PD PEREZ, JOSE F. 4341 S.W. 138TH CT. MIAMI FL	of Florida. Such change was auth tions of, Section 607.0505, Florida nt and title if applicable. (NOTE: Re ID DIRECTORS	gistered Agent signature requests.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	tion's board of directors. Thereby accept the apprint	AND DIRECTOR  Change	RS IN 12 Addition
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14. 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 truestee 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, with all other like empowered. all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE: \_

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CJTY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PR

☐ DELETE

Daytime Phone #

Change

Addition