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Mailing Address

5301 SW 87TH AVE

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 06, 1999 8:00am

Secretary of State

02-06-1999 90025 006 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name M50658

Principal Place of Business

5670 NW 78TH AVE

SIGNATURE:

TIM HALPIN EQUIPMENT CORPORATION

MIAMI FL 3316		MIAMI FL 33165			DO NOT WE	RITE IN THIS	CDACE .	_
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2 Principal P	Place of Business	2a. Mailing Address			4, FEI Number		110	oplied For
	26. Maining Address			59-2796492		. ——	ot Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.			39-2790492			
	. w, etc.	27			5. Certifcate of Status Desired	:□		Additional equired
City & Star	te .	Citý & State			a Floribus Communication Pinancian			·
23		28			6. Election Campaign Financing Trust Fund Contribution	' _□		May Be to Fees
Zip	Country	Zip	Coun	itry				to rees
24	25	29	30		This corporation owes the cu Personal Property Tax.	rrent year ma	angibie ∐Yes	□No `
241	9. Name and Address of Current	11	130		10. Name and Address of New	Registered		
	1,27		- 1	81 Name				
HAL	PIN, TIMOTHY D.							
5301 SW 87TH AVE		WAN.	1	82 Street Address (P.O. Box Number is Not Acceptable)				
	MI FL 33165		· -	83		11. 11. 1	an our early all deserting	3 5 . a 17 : 65:
						1.7		31.33, 14
ı		·	1	84 City		FL	85 Zip	Code
44 765/2002	t grad	and CO7 4500. Florida Ptotute						
office or i	to the provisions of Sections 607:0502 registered agent, or both, in the State of	of Florida. Such change was a	uthorized I	by the corporation	oration submits this statement for the on's board of directors. I hereby acc	e purpose or ept the appoir	cnanging its ntment as re	registered
🥴 agent. I a	am familiar with, and accept the obligati	ions of, Section 607.0505, Flor	rida Statut	es.	• •			۱ ا
SIGNATURE								
	Signature, typed or printed name of registered agent		Registered A	gent signature require	ed when reinstating)	DATE		
42	OFFICERS AND	NIDECTORS.	4.0		* ADDITIONO/CHANCES TO O	CEICEDE AM	D DIDECTO	ADD IN 40
12.		D DIRECTORS	13.	- I	ADDITIONS/CHANGES TO O	FFICERS AN		
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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 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 or an attachment with an address, with all other like empowered.