


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P0000024514 1. Entity Name FLORIDA EQUIPMENT SUPPLIES, INC.	
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Principal Place of Business 125 N.E. 9TH STREET MIAMI, FL 33132	Mailing Address 125 N.E. 9TH STREET MIAMI, FL 33132
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DO NOT WRITE IN THIS SPACE



04012008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0988868	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROVIROSA, JORGE P
125 NORTHEAST 9TH STREET
MIAMI, FL 33132

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000879973
 04/15/08-80042-025 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROVIROSA, JORGE P 125 NORTHEAST 9TH STREET MIAMI, FL 33132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROVIROSA, FRANK V 125 NORTHEAST 9TH STREET MIAMI, FL 33132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROVIROSA, RICHARD G 125 NORTHEAST 9TH STREET MIAMI, FL 33132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **FRANK V. ROVIROSA** 04/02/08 (305) 373-4765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #