

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000087782

FILED
Aug 23, 2007
Secretary of State

Entity Name: ALQUIP AGRICULTURAL EQUIPMENT SUPPLY, INC.

Current Principal Place of Business:

3290 NW 29TH ST
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3290 NW 29TH ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-1059806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, CARLOS MANUEL
6925 GLEN EAGLE DR
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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.

SIGNATURE: CARLOS MARTINEZ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARTINEZ, CARLOS MANUEL
Address: 6925 GLEN EAGLE DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: MARTINEZ, OLGA
Address: 1825 SW 125 COURT
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS MARTINEZ

D

08/23/2007

Electronic Signature of Signing Officer or Director

Date