

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000094259

1. Entity Name

LMB EQUIPMENT, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT -8 PM 5:07

Principal Place of Business

108 S.E. 46th Street
Cape Coral, FL 33904

Mailing Address

108 S.E. 46th Street
Cape Coral, FL 33904

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

108 S.E. 45th Street

Suite, Apt. #, etc.

P.O. Box 2692

City & State

Cape Coral, FL

City & State

Middlesboro, KY

Zip

33904

Country

USA

Zip

40965

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

31-1343512

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Hale, Brian,
108 S.E. 46th Street
Cape Coral, FL 33904

Name

Brian Hale

Street Address (P.O. Box Number is Not Acceptable)

108 S.E. 45th Street

City

Cape Coral

FL

Zip Code

33904

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.

SIGNATURE

Brian Hale

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Hale, Brian, Director, ☐ Delete
President, Secretary & Treasurer
108 S.E. 46th Street
Cape Coral, FL 33904

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
300004638453--0
-10/16/01--01038--011
****550.00 ****550.00

TITLE
NAME
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CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brian Hale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)