

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024830

**FILED**  
**Feb 20, 2011**  
**Secretary of State**

**Entity Name:** HEAVY EQUIPMENT CLAIMS OF FLORIDA, INC.

**Current Principal Place of Business:**

6250 SEDGEWYCK CIRCLE WEST  
DAVIE, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

6250 SEDGEWYCK CIRCLE WEST  
DAVIE, FL 33331

**New Mailing Address:**

**FEI Number:** 30-0073764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DADE COUNTY CORPORATE AGENTS, INC.  
20801 BISCAYNE BOULEVARD, SUITE 506  
AVENTURA, FL 33180 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FEINBERG, MARK  
Address: 6250 SEDGEWYCK CIRCLE WEST  
City-St-Zip: DAVIE, FL 33331

Title: STD  
Name: SANCHEZ, RICHARD  
Address: 15030 SW 178 TERR  
City-St-Zip: MIAMI, FL 33187

I hereby 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 all other like empowered.

SIGNATURE: MARK FEINBERG

PRES

02/20/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date