## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048069

Entity Name: COMMERCIAL EQUIPMENT & PARTS, INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5 BENNETT LANE 22 BUFFALO MEADOW LANE PALM COAST, FL 32137 PALM COAST, FL 32137

Current Mailing Address: New Mailing Address:

5 BENNETT LANE 22 BUFFALO MEADOW LANE PALM COAST, FL 32137 PALM COAST, FL 32137

FEI Number: 81-0550005 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AQUINO, AMANDA L
5 BENNETT LN
PALM COAST, FL 32137 US
AQUINO, ALFREDO D
22 BUFFALO MEADOW LANE
PALM COAST, FL 32137 US

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: ALFREDO D AQUINO 04/23/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 PD
 ( ) Delete

 Name:
 AQUINO, AMANDA L

 Address:
 5 BENNETT LN

 City-St-Zip:
 PALM COAST, FL 32137

 Title:
 VPD
 ( ) Delete

 Name:
 AQUINO, HERLINDO A

 Address:
 5 BENNETT LANE

 City-St-Zip:
 PALM COAST, FL 32137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: AQUINO, ALFREDO D
Address: 22 BUFFALO MEADOW LANE
City-St-Zip: PALM COAST, FL 32137

Title: VPD (X) Change ( ) Addition

Name: AQUINO, JOVITA M

Address: 22 BUFFALO MEADOW LANE
City-St-Zip: PALM COAST, FL 32137

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: ALFREDO D AQUINO PD 04/23/2008