

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000046386

FILED
Oct 08, 2008
Secretary of State

Entity Name: FORT MYERS TRAILER AND EQUIPMENT COMPANY, INC.

Current Principal Place of Business:

3240 CARGO STREET
FT. MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 260182
PEMBROKE PINES, FL 33026 US

New Mailing Address:

FEI Number: 27-0087323 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEIBOWITZ, ALAN
5139 WATERS EDGE WAY
COOPER CITY, FL 33330 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: ALAN LEIBOWITZ

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: PRES () Delete
Name: LEIBOWITZ, ALAN
Address: 5139 WATERS EDGE WAY
City-St-Zip: COOPER CITY, FL 33330 US

Title: VP (X) Delete
Name: JOSLIN, RICHARD
Address: 3240 A CARGO STREET
City-St-Zip: FORT MYERS, FL 33916

Title: S () Delete
Name: LEIBOWITZ, SUSAN
Address: 5139 WATERS EDGE WAY
City-St-Zip: COOPER CITY, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEIBOWITZ, ALAN
Address: 5139 WATERS EDGE WAY
City-St-Zip: COOPER CITY, FL 33330 US

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: ALAN LEIBOWITZ

Electronic Signature of Signing Officer or Director

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10/08/2008

Date