


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90334 032 ***150.00

DOCUMENT # P04000120699 1. Entity Name GLOBAL EQUIPMENT INVESTMENTS, INC	
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Principal Place of Business 9731 FONTAINEBLEAU BLVD STE 204 MIAMI, FL 33172	Mailing Address 9731 FONTAINEBLEAU BLVD STE 204 MIAMI, FL 33172
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2. Principal Place of Business - No P.O. Box # 755 Nw 133 Ct	3. Mailing Address 755 Nw 133 Ct
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Miami FL	City & State Miami FL
Zip 33182	Country Miami-Dade
Zip 33182	Country Miami-Dade

40000000000000000000000000000000

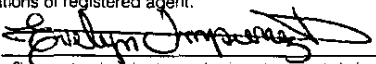


02282007 Chg-P CR2E034 (12/06)

4. FEI Number 20-1526985	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent UMPIERREZ, EVELYN 2301 S W 129TH AVE MIAMI, FL 33175	7. Name and Address of New Registered Agent Name Evelyn Umpierrez Street Address (P.O. Box Number is Not Acceptable) 755 Nw 133 Ct City Miami FL Zip Code 33182
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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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 04/10/07
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST UMPIERREZ, EVELYN 9731 FONTAINEBLEAU BLVD STE 204 MIAMI, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	755 Nw 133 Ct Miami FL 33182 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BALLACHE, CHRISTIAN 9731 FONTAINEBLEAU BLVD 204 MIAMI, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	755 Nw 133 Ct Miami FL 33182 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.	
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	04/10/07 3052232052 <small>Date Daytime Phone #</small>