

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000159735

**FILED**  
**Nov 01, 2009**  
**Secretary of State**

**Entity Name:** CARRUJO EQUIPMENT SALES, INC.

**Current Principal Place of Business:**

2199 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

210 71ST STREET  
301  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

2199 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

**New Mailing Address:**

210 71ST STREET  
301  
MIAMI BEACH, FL 33141

**FEI Number:** 20-1938821

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOREL, FELIX  
2199 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134 US

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

MOREL, FELIX  
210 71ST STREET  
301  
MIAMI BEACH, FL 33141 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: FELIX MOREL

11/01/2009

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: P ( ) Delete  
Name: MOREL, FELIX  
Address: 2199 PONCE DE LEON BLVD, STE 200  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MOREL, FELIX  
Address: 210 71ST STREET SUITE 301  
City-St-Zip: MIAMI BEACH, FL 33141

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: FELIX MOREL

PTE

11/01/2009

Electronic Signature of Signing Officer or Director

Date