2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 14, 2005 8:00 am
Secretary of State
07-18-2005 90041 016 ***150.00

DOCUMENT # P04000169258

1. Entity Name
EQUIPMENT SALES & PARTS CORPORATION

Principal Place of Business	Mailing Address
309 CINNAMON BARK LANE ORLANDO FL 32835 US	P O BOX 618227 ORLANDO FL 32861 US

1st MOORE CR2E034 (10/04)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-1238912 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STINE, CAROL L
309 CINNAMON BARK LANE
ORLANDO FL 32835

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Is Not Acceptable)

City FL Zip Code

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 Carol L Stine 8-22-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STINE, CAROL L 309 CINNAMON BARK LANE ORLANDO FL 32835	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Carol L Stine 9-11-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 4602737 # P04000169258

August 22, 2005

To Whom It May Concern:

I just recently started this new corporation. I was not aware of the deadline or the penalty for submitting this form after May 1st. I have already sent in the $150.00. I am asking that you accept the $150.00 and please waive the $400.00.

Sincerely,

Carol Stine, Pres.

Carol Stine
Equipment Sales & Parts Corp.