2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 08:00 AM Secretary of State

DOCUMENT # P04000170489 1. Entity Name PROFESSIONAL EQUIPMENT CORP.								Secreta	ry (of St	ate	
Principal Place of Business				Mailing Addross			1					
2900 NW 33RD AVE.				2900 NW 33RD AVE.								
MIAMI, FL 33142				MIAMI, FL 33142			}	•				
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2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Sulte, Apt. #, etc.			04132006	;Chg-P	CR2E03	4 (11/05)		
City & State			1	City & State			4. FEI Number	•			opplied For Not Applicable	
Zìp	Country			Zip	Coun	itry	5. Certificate of Status Desirod [\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent					
Name												
HERNAND					Street Address (P.O. Box Number is,Not Acceptable		is,Not Acceptable)					
MAMI, FL 33142									1_			
						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. If am familiar with, and accept the obligations of registered agent.												
the configuration of regional agents.												
SIGNATURE Signature, typod or printed name of registered agent and life if applicable. DYDIE Registered Agent algorithm required when is								:	DATE			
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees												
10.		OFFIC	ERS AND DIREC	CTORS	11.		ADDITIONS/C	HANGES TO OFFICE	RS AND	DIRECTOR		
TITLE	PD HERNANDEZ, NEMECIO			☐ Dolete		E				Change	Addition	
NAME STREET ADDRESS	-				et address		•	}				
CITY-ST-ZIP	MIAMI, FL	33142		·	CITY	-S7-Z1P			4			
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STREET ADDRESS (CXTY-ST-ZIP					1	et address -St-Zip					Ì	
12. I hereby of indicated of the concentration	ertify that the on this repor opration or th or on an afte	e information suc it or supplement be recoiver or tru inclinate with an	oplied with this to al roport is true a stoe empowered address, with a	iling does not qualify to and accurate and that r if to execute this report officer like empowered	or the exemple signal as require	emptions contained ture shall have the s red by Chapter 607	in Chapter 119, same logal effect Florida Statutes;	Florida Statutes. (furi as if made under oath and that my name ap	her certif ; that I ar pears in	y that the l n an office Block 10 o	Information f or director x Block 11 If	