FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1999

Principal Place of Business

1000 HARBOR BLVD

TAX DEPT 9TH FLOOR

(6)

DOCUMENT # GENERAL EQUIPMENT MANAGEMENT, INC.

Mailing Address

1000 HARBOR BLVD TAX DEPT 9TH FLOOR

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90033 050 ***150.00



DO NOT WRITE IN THIS SPACE

WEEHAWKEN NO U/U6/					WEETEN NEW OTOOT						3. Date Incorporated or Qualified				
		•			-		~	_			03/16/1992				ļ
2. Principal Place of Business					2a. Mailing Address						4. FEI Number Applied F				or
-						26					84-1131311			Not Applicable	
Suite, Apt. #, etc.					Suite, Apt. #, etc.							ı 🗆	\$8.7	Additiona	al
-					27						5. Certificate of Status Desired	, L.	Fee	Required	
City & State					City &	State					6. Election Campaign Financia	ng	\$5.0	0 May Be	,
23	•	28	28						Trust Fund Contribution		Adde	d to Fees			
Zip		C	ountry		Zip		Ç	ountry			8. This corporation owes or ha	s paid the cur	ent year		
24		25	·	29	29 30			il			Personal Property Tax due		Yes	∐ No	
	9. Name		ddress of Current	Regis	egistered Agent						10. Name and Address of Ne	w Registered	\gent_		
CO	N SE	RVICE COMPANY	·				81	Name			-				
	1 HAYS S	-				82	82 Street Address (P.O. Box Number is Not Acceptable)								
	LLAHASSE		-												
174			ZOO : EVE					83]
						94 Ciby					85 Z	p Code			
						84 City				FL	-				
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered															ered
			both, in the State of accept the obligat							rporatio	on's board of directors. I hereby a	accept the app	omunent	as register	eu
agent. I as	n tamiliar wi	ith, and	accept the obliga-	lions o	1, 56611	1,0000.10011	1011012 01		,-						
SIGNATURE	Signature pyperi	or poste	name of registered agen	and title	ıl applica	ble. (NC	OTE. Registe	Hed Age	mi signatu	re required	d when reinstating)	DATE			
12.	oig ialaic, typeo		OFFICERS AND				13	3.			ADDITIONS/CHANGES TO (OFFICERS AND			
TITLE	D		7			DELETE	1.3	TITLE		T			Chang	je ∟_iAdi	dition
NAME	GOERT	Z GEP	ÁLD				1.2	NAME							
STREET ADDRESS	1000 H						1.3	STREET	ADDRESS						
CITY-ST-ZIP			NJ 07087				1,4	CITY-S	T-ZIP	1					
TITLE	PD/					DELETE	2.1	TITLE					Chang	je ∐ Adi	ldition
NAME	DYER S	STEPH	EN R.				2.2	NAME			•				
STREET ADDRESS	1000 H						2.3	STREET	ADDRESS	ŀ	-				
CITY-ST-ZIP			NJ 07087				2.4	4 CITY - S	ST-ZIP	1					
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NAME		FY CI	FFORD B.				32	NAME		1			•		
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· .			NJ 07087			/	34	. CITY-S	ST-ZIP		-				
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NAME 1	JOSEPI	H_CIA	FLHA				4	2 NAME		C	iavarella, J	os e rh	1		
STREET ADDRESS	1000_H						4.3	STREET	ADDRESS		·	1			
CITY S" ZIP			NJ 07087			1	4.4	CITY-S	T-ZIP						
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NAME	LEVINE	KFN				V	5.2	NAME		1					
ا ر	1000 H		R BLVD						ADDRESS						
STREET ADDRESS	WEEHA							CITY-S							
CITY-ST-ZIP-	7166117					DELETE		TITLE		\top			Chan	ge 🔲 Ad	tdition
NAME I						-	6.2	NAME							
. 1									ADDRESS						
STREET ADDRESS							64	LCITY-S	T-71P						
CITY-\$1-ZIP	ertify that th	ne infor	nation supplied wil	th this	filina do	es not qualify	for the	vomo	tion etc	ted in S	Section 119.07(3)(i), Florida Statu	tes. I further co	rtify that	the informa	ation
indicated	on this annu	sal rep	ort or supplemental	annua	al report	is true and a	courate a	and th e this	at my s	ignature is requi	e shall have the same legal effective of the same legal effective by Chapter 607, Florida Stat	τ as it made un utes; and that i	ny name	appears in))
officer or Block 12	airector of th or Block 13:	ne corr il chan	oration or the recei ged, or on ap⊸athor	h <u>me</u> n.	with ar	address.	~ UNGUU					, , ,			
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