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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 2:58

DOCUMENT # **P93000032541 (3)**

1. Corporation Name
JT & JF EQUIPMENT, INC.

Principal Place of Business	Mailing Address
1380 SOUTH FLAMINGO ROAD FORT LAUDERDALE FL 33325	1380 SOUTH FLAMINGO ROAD FORT LAUDERDALE FL 33325

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/29/1993
3a. Date of Last Report: 05/17/1994

2. Principal Place of Business	2a. Mailing Address
21 4041 NW 93RD AVENUE	26 4041 NW 93RD AVENUE
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 SUNRISE, FL 33351	City & State 28 SUNRISE, FL 33351
Zip / County 24 33351 / 25 BROWARD	Zip / County 29 33351 / 30 BROWARD

4. FEI Number: 65-0404987 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KLEIN, THEODORE J ESQ
16855 N.E. 2ND AVENUE
SUITE 301
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature, type or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when restoring)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☒ Change ☐ Addition
NAME	BODKINS JR, JAMES T	12 NAME	
STREET ADDRESS	1380 S FLAMINGO ROAD	13 STREET ADDRESS	4041 NW 93RD AVENUE
CITY ST ZIP	FORT LAUDERDALE FL	14 CITY ST ZIP	SUNRISE, FL 33351
TITLE	VP	21 TITLE	☒ Change ☐ Addition
NAME	BODKINS, JAMES F	22 NAME	
STREET ADDRESS	1380 S FLAMINGO RD	23 STREET ADDRESS	4041 NW 93RD AVENUE
CITY ST ZIP	FORT LAUDERDALE FL	24 CITY ST ZIP	SUNRISE, FL 33351
TITLE	TS	31 TITLE	☒ Change ☐ Addition
NAME	BODKINS, KAREN	32 NAME	
STREET ADDRESS	1380 S FLAMINGO RD	33 STREET ADDRESS	4041 NW 93RD AVENUE
CITY ST ZIP	FORT LAUDERDALE FL	34 CITY ST ZIP	SUNRISE, FL 33351
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Karen L Bodkins KAREN L. BODKINS 4/8/95 749-2756
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 305-770-2756 Daytime Phone #

0234242 CP