

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Matheson
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 11 AM 8:39

DOCUMENT # P93000034713 (6)

1. Corporation Name

ECO A HYDRAULIC LIFTS, INC.

Principal Place of Business

**1000 HIALEAH DRIVE
HIALEAH FL 33010
US**

Mailing Address

**SONNENSCHN NATH & ROSENTHAL
601 SOUTH FIGUEROA STREET, SUITE 1500
LOS ANGELES CA 90017**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/13/1993

3a. Date of Last Report

07/11/1994

4. FEI Number

65-0410720

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

2. Principal Place of Business

21

City, Apt. #, etc.

2a. Mailing Address

26

City, Apt. #, etc.

23

City & State

28

City & State

24

Zip

Country

29

Zip

Country

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent Signature required when replacing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	SUGIURA, WATARU
STREET ADDRESS	5651 EAST FRANCIS STREET
CITY- ST- ZIP	ONTARIO CA
TITLE	VP
NAME	HOGG, SAMUEL
STREET ADDRESS	C/O 1000 HIALEAH DRIVE
CITY- ST- ZIP	HIALEAH FL
TITLE	TCFO
NAME	SUGIURA, WATARU
STREET ADDRESS	5651 EAST FRANCIS STREET
CITY- ST- ZIP	ONTARIO CA
TITLE	S
NAME	HAHN, ELLIOT
STREET ADDRESS	C/O 1500; 601 S. FIGUEROA STREET
CITY- ST- ZIP	LOS ANGELES CA
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(3)(b), 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 in an attachment with an addition.

SIGNATURE:

Elliott J. Hahn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Elliott J. Hahn

Jan. 11, 1995 (213) 892-5049
Date Expiration Date

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Sandra B. Mornam
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☐

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Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

25. Suite, Apt. #, etc.

26. City & State

27. Zip

28. Country

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SUITE 105
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SIGNATURE

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(NOTE: Registered Agent signature required when registering)

DATE

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NAME	HAHN, ELLIOT
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TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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1.1 TITLE	☐ Change ☐ A
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ 7
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ 7
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ 7
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ 7
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ 7
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and accurate and that my signature shall have the same legal effect as if I appear in Block 12 or Block 13 of this report, or in an attachment with an address.

SIGNATURE:

Elliot J. Hahn
ELLIO J. HAHN

Jan. 11, 1995 (213) 892-504

SONNENSCHN NATH & ROSENTHAL

601 SOUTH FIGUEROA STREET

SUITE 1500

LOS ANGELES, CALIFORNIA 90017-5704

CHICAGO
NEW YORK
SAN FRANCISCO
ST. LOUIS
WASHINGTON, D.C.

(213) 623-9300
FACSIMILE
(213) 623-9924

Elliott J. Hahn
(213) 892-5049

January 12, 1994

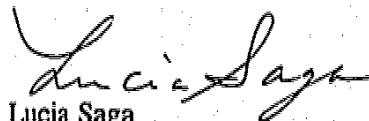
Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: ECOA Hydraulic Lifts, Inc.

Gentlemen:

In connection with the above-captioned corporation, we are enclosing herewith original and a copy of 1995 Corporation Annual Report together with our check in the amount of \$208.75 made payable to the Department of State, State of Florida. Please file the original and return a conformed copy to this office in the self-addressed, stamped envelope which is also enclosed. Also, please note that a Certificate of Status is requested.

Very truly yours,



Lucia Saga
Secretary to Mr. Hahn

Enclosure

cc: ECOA Hydraulic Lifts, Inc.