

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

FILED

Jan 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000077177 (2)

1. Corporation Name
CONTRACT EQUIPMENT RENTALS, INC.



Principal Place of Business
1221 N. 72 AVENUE
HOLLYWOOD FL 33024

Mailing Address
1221 N. 72 AVENUE
HOLLYWOOD FL 33024-5504

3. Date Incorporated or Qualified 10/28/1993
3a. Date of Last Report 01/26/1996

2. Principal Place of Business

21 1490 NW 65 Ave
Suite, Apt #, etc.

22 City & State
Plantation, FL

23 Zip 33313 Country Broward

24 33313 25 Broward

2a. Mailing Address

26 1490 N.W. 65 Ave
Suite, Apt #, etc.

27 City & State
Plantation, FL

28 Zip 33313 Country Broward

29 33313 30 Broward

4. FEI Number 65-0443130
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

HAUBER, ROBERT W
1221 N. 72 AVENUE
HOLLYWOOD FL 33024

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
1490 NW 65 Avenue
83
84 City Plantation FL 85 Zip Code 33313

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 *Richard Hauber*
Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/02/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HAUBER, ROBERT W	
STREET ADDRESS	1221 N. 72 AVENUE	
CITY-ST-ZIP	HOLLYWOOD FL 33024	
TITLE	VST	<input checked="" type="checkbox"/> DELETE
NAME	HAUBER, ROBERT W	
STREET ADDRESS	1221 N. 72 AVENUE	
CITY-ST-ZIP	HOLLYWOOD FL 33024	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	1490 N.W. 65 Ave
1.4 CITY-ST-ZIP	Plantation, FL 33313
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Vice-President
2.3 STREET ADDRESS	Hauber, Richard
2.4 CITY-ST-ZIP	1490 NW 65 Ave
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Plantation, FL 33313
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: *Richard Hauber*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-97

PSX 5827110

CR2E034 (9/96)