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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300086825 (5)

E & L BACKHOE EQUIPMENT RENTALS, INC.

Principal Place of Business

Mailing Address

FILED May 05 1998 8:00am Secretary of State



18114 E. TRAFALGAR DR. LOXAHATCHEE FL 33470 US		16114 E. TRAFALGAR DR. LOXAHATCHEE FL 33470 US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 12/20/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /6/14	L. Shalalgar Dr	26 Same		65-0459871	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 City & State	Blorida	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 334	470 25 Palm Bea		Country	This corporation owes or has paid the current Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
GARNER, LAURA M			61 Ivanie		
16114 E TRAFALGAR DR LOXAHATCHEE FL 33470				kiress (P.O. Box Number is Not Acceptable)	·
			63		
			84 City	FL	85 Zip Code
11. Pursuant t office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1708, Florida Statutes Florida Sych change was au	the above-named co	proporation submits this statement for the purpose reation's board of directors. I hereby accept the ap	of changing its registered
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 open, or both, in the State of lorida such change was authorized by the corporation's hoard of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the oblighing of Section 607.0505, Florida Statutes.					
SIGNATURE	Shipmore, typen as product name of egral astingent	ALIMA ROPE SHOW (NOTE I	Registered Agon Signifure rec	pled when roinstating)	1 7/0//18
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DP .	☐ DELETE	1.1 TITLE		Change Addition
NAME	GARNER, LAURA M.		1.2 NAME		
STREET ADDRESS	16114 E. TRAFALGAR DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	LOXAHATCHEE FL S	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	GARNER, ERNEST H.		2.2 NAME		
STREET ADDRESS	16114 E. TRAFALGAR DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	LOXAHATCHEE FL		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	:	DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	_ .	DELETE	4.4 CITY-ST-ZIP		Donner Dager
TITLE		DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		☐ DELETE	5.4 C(TY - ST - Z(P) 6.1 TITLE		☐ Change ☐ Addition
NAME		<u> </u>	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		İ
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	ortify that the information armyllad with	the films does not qualify for		- Castian 440 07(0V) Flacida Otal da a Litada	

14. Thereby 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 eath; 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 when an adoption.

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