FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
1995 JUL 25 AM 9:18
TALLAHASSEE, FLORIDA

DOCUMENT # P94000015623 (9)

1. Corporation Name
HI-POWER EQUIPMENT, INC.

Principal Place of Business: ~~ONE S.E. 3RD AVENUE STE 1040 MIAMI FL 33131~~

Mailing Address: ~~ONE S.E. 3RD AVENUE STE 1040 MIAMI FL 33131~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/25/1994
3a. Date of Last Report: N/A
4. FEI Number: 65-0475144 — Applied For / Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 5975 NW. 79 AV	26 5975 NW 79 AV
22 Suite, Apt #, etc. N/A	27 Suite, Apt #, etc. N/A
23 City & State MIAMI - FL	28 City & State MIAMI FL
24 Zip 33166 — 25 Country U.S.	29 Zip 33166 — 30 Country U.S.

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

~~MDR, LAZARO J ESQ.
ONE S.E. 3RD AVENUE
STE. 1040
MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name: EDWARD CASAS
82 Street Address (P.O. Box Number is Not Acceptable): 6039 COLLINS AV. #1034
83 APT -1034
84 City: MIAMI BEACH FL 85 Zip Code 331[illegible]

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] E. CASAS — 7/19/95
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS

TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

(six blank blocks)

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE	P/D	☐ Change ☒ Addition
1 NAME	Enrique Delgado	
1 STREET ADDRESS	5975 NW 79 AV	
1 CITY ST ZIP	MIAMI FL 33166	
2 TITLE	S	☐ Change ☒ Addition
2 NAME	Enrique Delgado	
2 STREET ADDRESS	5975 NW 79 AV	
2 CITY ST ZIP	MIAMI FL 33166	
3 TITLE		☐ Change ☐ Addition
4 TITLE		☐ Change ☐ Addition
5 TITLE		☐ Change ☐ Addition
6 TITLE		☐ Change ☐ Addition

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)(k), 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: [signature] ENRIQUE DELGADO 7-19-95 (305) 471-8497
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0131706 CP