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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P9400033192 (3)

MERRITT EQUIPMENT, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						r 1981/1987 (10 181/) BIBIN GOUN BEIN GANN BAND INGO WAN HAND IBING WAN HORY		
650 STONEHENGE DRIVE MARY ESTHER FL 32569			650 STONEHENGE DRIVE MARY ESTHER FL 32569			DO NOT WRITE IN TH	S SPACE	
						3. Date Incorporated or Qualified 04/29/1994		
2. Principal Pl	ace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	Applied For	
1		26	<u> </u>			59-3250622	Not Applicable	
Suite, Apt. (27				Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	•	 	Crty & State			6. Election Campaign Financing	\$5.00 May Be	
Zip Country			Zip Country			Trust Fund Contribution	Added to Fees	
¬ '		<u>├</u>	30 Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
<u> </u>	9. Name and Address of Cur	29 29 Age		01		10. Name and Address of New Registers		
ME	RRITT, CHARLES G			81	Name			
	STONEHENGE DRIVE			<u> </u>				
	RY ESTHER FL 32569			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
114 11								
				<u></u>				
				84	City	F	85 Zip Code	
SIGNATURE .	Signature, typed or printed name of registered	Des (2)	nem	Ø	_CO	tion's board of directors. I hereby accept the a dn't need to Sign that additions/Changes to Officers A ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D		DELETE	1.1 TITLE			Change Addition	
NAME			1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS								
CITY-ST-ZIP	MARY ESTHER FL 32569			1.4 CITY - S	T-ZIP			
TITLE	MERRITT, KATHLEEN J BEET ADDRESS 650 STONEHENGE DRIVE		DELETE	2.1 TITLE			☐ Change ☐ Addition	
NAME				2.2 NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	MARY ESTHER FL 32569		*******	2. 4 CITY-	ST-ZIP			
TITLE	☐ DELETE			3.1 TITLE			Change Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP			DELETE	34. CITY-1	ST-ZIP		Change Addition	
TITLE DELETE			4.1 TITLE			Change Addition		
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET				
CITY+ST+ZIP TITLE			DELETE	4.4 CITY-S 5.1 TITLE	I-ZIP		Change Addition	
VAME		-	, beleve	5.2 NAME				
STREET ADDRESS				5.3 STREET	ADORESS			
CITY-ST-ZIP				5.4 CITY-S				
TITLE			DELETE	6.1 TITLE			Change Addition	
NAME		-	- **	6.2 NAME				
					I			
					ADDRESS			
STREET ADDRESS				6.3 STREET				

of this arrived report or supplemental arrived report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am a 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 a altay imput with an address.

SIGNATURE: