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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P94000040465 (4)

EQUIPMENT SALES OF ORLANDO, INC.





Principal Place of Business Mailing Address				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
3124 W 37TH ST ORLANDO FL 32809		3124 W 37TH ST ORLANDO FL 32809					
					3. Date Incorporated or Qualife 05/31/1994	d 3a. Date of Le 08/0	nst Report 1/1995
2. Principal Plac	ce of Business	2a. Mailing Adoress			4. FEI Number		Applied For
1		26			59-3251965	59-3251965 Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	5. Certificate of Status Desired Security Status Desired Fee Required	
2		27					
City & State		Orty 3 State			 Election Campaign Financing Trust Fund Contribution 		5.00 May Be Added to Fees
3		28 Ζιρ	Cour	atov	8. This corporation has liability		
Zip ⊐	Country	29	30	y	Florida Statutes	Yes □ No	
4	9. Name and Address of Curre				10. Name and Address of Ne	w Registered Ager	it
				81 Nam	e		
	an, Ultima D Robinson St 600			82 Stree	et Address (P.O. Box Number is Not Accep	otabie)	
	IDO FL 32801		-	84 City		8	Zip Code
					corporation submits this statement for the i's board of directors. I hereby accept the		· ·
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AND DIR	ECTORS IN 12 range Addition
TOLE	D OTINE NO					<u>.</u>	- 3.
NAME	STINE, VIC 3124 W 37TH ST		12 N/	REFT ADDRES	(2)		
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ATTREE VINCOUS				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 119.07(3)(k). Florida Statutes 1 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 certify that I am an object or director of the corporation or the receiver or trustee enjowered 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 attact ment with an address

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-96 40784/9454

CR2E034 (12/95)