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

Mailing Address

6300 N.W. 40TH SQUARE

VIRFINIA GARDENS FL 33166

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

5348 W. 14TH AVENUE

SIGNATURE: X

HIALEAH FL 33012



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED

Apr 22 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

POCUMENT # P94000055197 (5)

BOGARDUS WAREHOUSE EQUIPMENT. INC

3. Date Incorporated or Qualified **07/25/1994 4.** FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0545852 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Z(p)8. This corporation owes or has paid the current year Intangible 24 Yes 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BOGARDUS, MARTIN E 5348 W. 14TH AVENUE Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 83 Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE \overline{PD} 1.1 HTLE Change Addition TITLE **BOGARDUS, MARTIN E** NAME 1.2 NAME **5348 W. 14TH AVENUE** STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 14 City - St - 7/P DELETE TITLE 21 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-\$1-ZIP DELETE Change Addition TITLE 3.1 TITUE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE ☐ Change ☐ Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5130TLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY+ST-ZIP 54 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 suppliemental 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 trustos 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 the address.