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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000017403 (3)

I.P.S. EQUIPMENT SERVICE INC.

Suite, Apr. # etc. Suite, Apr. # etc. Suite, Apr. #, etc. S	Principal Place of Business Mailing Address					- 1 - AMDINADA 310 (010) BITISE BOSEC BOTTO BOTTO BOTTO BOTES 11051 1901 ANDIE DESPU (11) (00)				
2. Principal Flace of Business 2a. Mailing Address 4. FEI Number 45/01/1996 26/01/1996	18900 SW 56TH STREET 18900 SW 56TH STREET				_					
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SANCHEZ, IGNACIO P 1890 SW 56TH STREET 1990 STREET 1990 SW 56TH STREET 1990 SW		le		ate						
S. Name and Address of Current Registered Agent SANCHEZ, IGNACIO P 18900 SW 56TH STREET FT. LAUDERDALE FL 33332 83 84 City FL 85 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 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 in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Pursuant to the provisions of Sections 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in familiar with, and accept the appointment as registered agent in familiar with, and accept the appointment as registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its registered agent in familiar with a purpose of changing its		₁	 	·	Country				der s. 199.032	
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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 agent. I am farminar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SI	SA	NCHEZ, IGNACIO P			81	Name			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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Signature, typed or printed name of registered agent and lefts if applicable (NOTE: Registered Agent signature required when reinstating)	11. Pursuant office or agent 1 a	to the provisions of Sections 607.0 registered agent, or both, in the Sta am fam⊪ar with, and accept the obt	502 and 607.1508, I ale of Florida. Such d ligations of, Section	Florida Statutes, the change was author 607.0505, Florida S	e above ized by Statutes	e-named co the corpora s.	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of chang of the appointme	jing its register nt as registere	
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	NAM ²		-	-		-		,		

14. I do 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 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.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY - ST-ZIP

5.4 CITY-ST-ZIP

63 STREET ADDRESS

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

62 NAME

SIGNATURE

STREET ADDRESS CITY+ST-ZIP

STREET ADDRESS

STREET ADDRESS

CHY-SI-ZIP TITLE

CITY - \$1 - ZIP

TIFLE

NAME

TITLE

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NAME STREET ADDRESS

GRE AND TYPED OR PRINCED NAME OF BIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

X 4/21/57 (954)434-1488

Change

Change

Change

Addition

Addition

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FILED

Apr 28 1997 8:00am

Secretary of State