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FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000026101 (2)

1. Corporation Name

B & H EQUIPMENT LOCATORS, INC.

Principal Place of Business

50 NE DIXIE HIGHWAY UNIT C-8
STUART FL 34994

Mailing Address

50 NE DIXIE HIGHWAY UNIT C-8
STUART FL 34994

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1995

4. FEI Number

65-0572703

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 130 NE Dixie Hwy

Suite, Apt. #, etc.

22 City & State

23 Stuart FL

Zip

24 34994-1842

Country

25 USA

2a. Mailing Address

26 130 NE Dixie Hwy

Suite, Apt. #, etc.

27 City & State

28 Stuart FL

Zip

29 34994-1842

Country

30 USA

9. Name and Address of Current Registered Agent

BARKER, DAVID M
50 NE DIXIE HIGHWAY UNIT C-8
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name

Barker, David M

82 Street Address (P.O. Box Number is Not Acceptable)

130 NE Dixie Hwy

83

84 City

Stuart

FL

85 Zip Code

34994

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME SCOTT SZAFRANSKI
STREET ADDRESS 1569 SE MINORCA AVE
CITY-ST-ZIP PORT ST. LUCIE FL

TITLE S ☐ DELETE

NAME TORRES, MARIO
STREET ADDRESS 2924 CAMINO AVE
CITY-ST-ZIP STUART FL

TITLE S ☐ DELETE

NAME HARRIS, MATTHEW E
STREET ADDRESS 2309 SE GILLETTE AVE
CITY-ST-ZIP PORT ST LUCIE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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]

1/20/98

561-692-4154

CR2E034 (10/97)