2000 UNIFORM BUSINESS REPORT (UBR)

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

DOCUMENT # P95000046936

2. Principal Place of Business

BEN-TOV, ELENA

8900 SW 104 ST **MIAMI FL 33176**

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

EARTH MOVING EQUIPMENT AND PARTS INC.

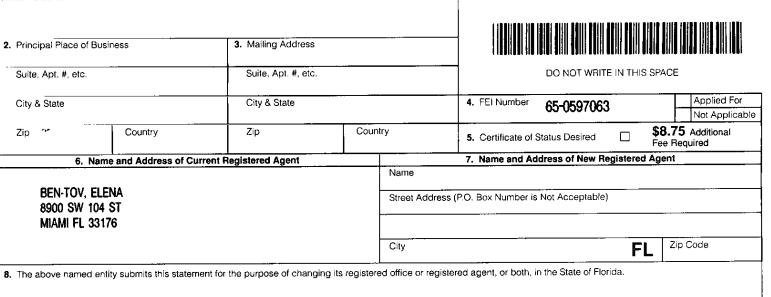
Country

6. Name and Address of Current Registered Agent

Mailing Address Principal Place of Business 7210 NORTHWEST 74TH AVENUE 7210 NORTHWEST 74TH AVENUE MIAMI FL 33166-2831 MIAMI FL 33166

FILED Feb 29, 2000 8:00 am **Secretary of State**

02-29-2000 90239 021 ***158.75



Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)									
Tax filing requirement and elects to do so. After MAY 1, 2000			FEE IS \$150.00 Fee will be \$550.00 to Department of State		Trus	ction Campaign Financing		Added 1	
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OIAZABAL, ESPERANZA 6524 SW 114 PLACE, #D MIAMI FL 33173	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RIESENBERG, ROBERT 281 BRIDGETOWN WAY WESTON FL 33326	. Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OLAZABAL, ESPERANZA 6524 SW 114 PLACE, #D MIAMI FL 33173	— □ Delete	TITLE — NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OLAZABAL, ESPERANZA 6524 SW 114 PLACE, #D MIAMI FL 33173	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLAZABAL, ESPERANZA 7210 N.W. 74TH AVE. MIAMI FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition

Country

Name

City

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (9/99)