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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

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May 05 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053757 (7)

JPB EQUIPMENT REPAIR, INC.

Principal Place of Business		Mailing Address		1 30013601 510 16101 01111 06111 06111	1 DEIST SYNDS HINT SENDS MY	(I (89) (89)
9378 SOUTHAMPTON PLACE BOCA RATON FL 33434		9378 SOUTHAMPTON PLACE BOCA RATON FL 33434				
				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified		
				07/07/1995		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		oplied For
21		26	·	65-0601066		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 / Fee Re	
City & State		City & State		6. Election Campaign Financing	\$5.00	
Zip	Country	28	Country	Trust Fund Contribution	Added 1	
24	25	29	30	8. This corporation owes or has paid Personal Property Tax due June 3		angible] No
	me and Address of Current		190	10. Name and Address of New Regi		
WIGGINS,			81 Name			
	TH WEST 5TH STREET		82 Street Add	(D.O. Bay N. astracia N. Assaulah		
MARGATE			82 Street Add	dress (P.O. Box Number is Not Acceptable	e)	
III/W/W// L			83			
			1 0		leal a	0.4
			84 City		FL 85 Zip C	Code
11. Pursuant to the pr	ovisions of Sections 607.0502	and 607 1508, Florida Sta	lutes, the above-named cor	rporation submits this statement for the pu	rpose of changing it	s registered
att	i aci ent, or both, in the State o	it Florida. Such change wa	as authorized by the corpora	ation's board of directors. I hereby accept	the appointment as	registerea
office or realstered	r with, and accept the obligat	ions of, Section 607.0505,	Florida Statutes			
office or registered agent. I am familia	r with, and accept the obligat	ions of, Section 607.0505,	Florida Statutes			
office or registered agent. I am familia SIGNATURE Signature, to	r with, and accept the obligat	ions of, Section 607.0505, and title if applicable (N	NOTE: Registered Agent signature requ		DATE	
office or registered agent. I am familia SIGNATURE Signature, s	r with, and accept the obligat	ions of, Section 607.0505, and him if applicable (N DIRECTORS	VOTE: Registered Agent signature requ	ured when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	-
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