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

PROFIT CORPORATION ANNUAL REPORT

1098



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000079404 (6)

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP TITLE

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

NAME

TITLE

NAME

EQUINAMICS, CORP.			
Principal Place of Business	Mailing Address		
6150 SW 76 ST 6150 SW 76 ST MIAMI FL 33143 MIAMI FL 33143 US		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified 10/13/1995
2. Principal Place of Business 21	2a. Mailing Address 26		4. FEI Number Applied For 65-0645475 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution
Zip Country 25	Zip 3	Country	Personal Property Tax due June 30.
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent			
LIEVANO, JUAN J 6150 SW 76 ST MIAMI FL 33143			Name Street Address (P.O. Box Number is Not Acceptable)
			City FL 85 Zip Code
 Pursuant to the provisions of Sections of office or registered agent, or both, in the agent. I am lamiliar with, and accept the 	17.0502 and 607.1508, Florida Statutes, State of Florida, Such change was aut obligations of, Section 607.0505, Florid	the above-na horized by the da Statutes.	named corporation submits this statement for the purpose of changing its registered the corporation's board of directors, i hereby accept the appointment as registered
SIGNATURE			· · · · · · · · · · · · · · · · · · ·
Signature: typed or printed name of registered agent and trito if applicable (INDTE: Registered Agent signature required when renalizing) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE DIP	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D / V
NAME LIEVANO, JUAN J	- Dittit	1.2 NAME	- ' - ' - ' '
0450 CW 70 CT			William C. Sussman
AJIASAI PI		1.3 STREET ADD	1370 11441 494 1146., 54166 511
CITY-ST-ZIP MIAMI FL	☐ DELETE	1.4 City - ST - ZI	
NAME	☐ DETEIF	2.1 TITLE	Change Addition
CIDECT ADDRESS		2.2 NAME	

2.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADORESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4 4 CITY - ST-ZIP

3.4. CITY-ST-ZIP

3 1 TITLE

32 NAME

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE

62 NAME

DELETE

DELETE

DELETE

DELETE

CITY - ST-ZIP 64 CITY - ST-2P 14. I hereby certify that the information sur-indicated on this annual report or sur-officer or director of the corporation Block 12 or Block 13 if changed in or the dwith this filing does not qualify for the exemption stated in Section 119.97(3)(i). Florida Statutes. I further certify that the information the internal annual record is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an the receiver or tystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ithan address.

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***61.25

FILED

Sep 03 1998 8:00am Secretary of State

Change

Change

Can LIEUANO Change

Addition

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☐ Addition

P6.3

Addition PRESIDENT