FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600005783 (1)

P & R EQUIPMENT SERVICE, INC.

FILED May 16 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				1	IRANIAAN NIN JANIA BIIN AANIN 86JIN A	AN MANAN MANAN		/ FRI ARE A	HI 1801	
315 BORADA ROAD SANFORD FL 32773 SANFORD FL 32773-5594												
						01	ite Incorporated or Qualified /17/1996	3a. D	ate of La	st Rep	port	
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FE	Number 335065			Appl	lied For	
21		26					59-335065	26			Applicable	
Suite, Apt.	<	Surte, Apt. #, etc.	27			5 . Co	ertificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State	·				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip	Countr				is corporation has liability fo			ers. 1	99.032.	
24	25	29	30						No			
	9. Name and Address of Curr	ent Registered Agent		81	Mana	10, Na	ame and Address of New F	egisterea	Agent			
	gg, ralph		1	٥'	Name							
315 BORADA ROAD SANFORD FL 32773				82	Street A	Address (P.O. Box Number is Not Acceptable)						
DAIN	FUHD PL 32//3			83								
•				84	City				85	Zip Co	ode	
								<u>FL</u>	_l L			
11. Pursuant to office or re agent. Lai	to the provisions of Sections 607.0 registered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida Statu de of Florida. Such change was igations of, Section 607.0505, Fl	tes, the at authorized lorida Stat	oove- d by t utes.	named o he corp	corporation su oration's boar	ubmits this statement for the rd of directors. I hereby acc	purpose o ept the app	f changi pointmen	ng its r it as re	registered gistered	
SIGNATURE	Signature, typod or printed name of registered	arout and title if anytherable (NO)	T. Danielston	I Amond	signatura.	required when rein	etation)	DATE				
12.		ND DIRECTORS	13.	1 Ağeni	Signature		DITIONS/CHANGES TO OFF		DIREC	TORS	IN 12	
TITLE	PSYD-	DELETE	1.1 TITLE		T		4/Director		Cha		Addition	
NAME	BRAGG, RALPH		12 N/	ME.	1	110000	ar bitecol					
STREET ADDRESS	315 BORADA ROAD		1.3 S1	HEET A	DDRESS	:						
CITY-ST-ZIP	SANFORD FL 32773		1.4 DITY - \$1 - ZIP		ZIP							
TITLE		DELETE	2.1 TI			VP13			Cha	nge .	Addition	
NAME			2.2-NA	M/E	ļ	Brag						
STREET ADDRESS			2.3 \$1	REET A	DDRESS (315 Bor	ada Rood					
CITY-ST-ZIP			2 4 0	ITY-ST	· ZIP	Sanford	R 30773					
TITLE		DELETE	3.1 ¹ Ti	īιE					Cha	nge	Addition	
NAME			3.2 INA	ME								
STREET ADDRESS			3.3 \$1	REET A	DDRESS							
CITY-ST-ZIP			3.4, 0	TY-ST	- ZIP							
TITLE		☐ DELFTE	4.1 10	ILE					☐ Cha	nge	Addition	
NAME			4.2 N	AME								
STREET ADDRESS			4.3 [5]	REET A	DDRESS							
CITY-ST-ZIP			4.4 CI	1Y-SI-	ZIP							
TITLE		DELETE	51 0	LE					☐ Cha	nge	Addition Addition	
NAME			5 2 NA	ME								
STREET ADDRESS			5381	REE1 A	DDRESS							
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		TY-SI-	ZIP						,	
TATLE		DELETE	6.1 11	LE					Cha	nge	Addition	
NAME			6.2 NA	ME	1							
STREET ADDRESS			6.3 \$1	REET A	DORESS							
CITY-ST-ZIP			6.4 CI	TY-ST-	717							

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 supplienental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

4/29/97

467-889-9119