

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000049410

1. Entity Name
FLEET-EQUIP, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90371 005 ***150.00

Principal Place of Business

Mailing Address

7876 BELVEDERE RD
WEST PALM BEACH FL 33411

7876 BELVEDERE RD
WEST PALM BEACH FL 33411-3823

2. Principal Place of Business

3. Mailing Address

7796 Belvedere Rd
Suite, Apt. #, etc.
#2

7796 Belvedere Rd
Suite, Apt. #, etc.
#2

City & State
West Palm Beach FL
Zip
33411
Country
USA

City & State
West Palm Beach FL
Zip
33411
Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0670162**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RATHBUN, THOMAS G
7876 BELVEDERE RD
WEST PALM BEACH FL 33411

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	RATHBUN, THOMAS G	7876 BELVEDERE ROAD, #2	WEST PALM BEACH FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		7796 Belvedere Rd #2	West Palm Beach FL 33411	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5.1.00 561/689-2909

CR2E034 (9/99)