FROM : FAX NO. :

FILED
May 06, 2004 8:00 am
Secretary of State
05-06-2004 90191 001 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000072701

1. Entity Name
HEAVY EQUIPMENTS INC.

Principal Place of Business
5151 COLLINS AVE
#633
MIAMI BEACH, FL 33140

Mailing Address
P.O. BOX ~~650916~~ 403697
~~MIAMI, FL 33265~~ MIAMI Beach FL 33140

042920:4 Chg-P CR2E034 (10/03)

2. Principal Place of Business | 3. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip | Country | Zip | Country

4. FEI Number: 65-0740355 Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
BETANCOURT, GILBERTO
4311 S.W. 154 PLACE
MIAMI, FL 33185

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BETANCOURT, GILBERTO
STREET ADDRESS	4311 S.W. 154 PLACE
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	DST
NAME	BETANCOURT, PATRICIA
STREET ADDRESS	4311 S.W. 154 PLACE
CITY-ST-ZIP	MIAMI, FL 33185

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

(TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition — blank)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] GILBERTO BETANCOURT PRES. April/29/04 305/7752388
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #