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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000031617

1. Corporation Name

W. C. EQUIPMENT COMPANY, INC.

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90007 019 ***150.00



| Principal Place of Business Mailing Address | | | | | , is in the same of the same o | | | |
|---|--------------------------------------|------------------------------------|------------|------------------|--|--|---------------------|--------------------|
| 3450 MARTIN LUTHER KING JR. BLVD. RIVIERA BEACH FL 33404 3450 MARTIN LUTHER KING RIVIERA BEACH FL 33404 | | | | D. | | | | |
| | | | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | _ | 3. Date Incorporated or Qualifed 04/08/1997 | | |
| Principal Place of Business 2a. Mailing Address | | | | | | 4. FEI Number | | plied For |
| 21 26 | | | | | | 65-0745626 | | t Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | | \$8.75 | |
| 22 27 | | | | | | | Fee Re | |
| City & State City & State | | | | | | 6. Election Campaign Financing | \$5.00 | |
| 23 28 | | | | | | Trust Fund Contribution | Added t | o Fees |
| Zip | Zip Country Zip | | | itry | | 8. This corporation owes the current year | r Intangible Yes | □No |
| 24 | 25 | | 30 | | | Personal Property Tax. | | |
| | 9. Name and Address of Curr | ent Registered Agent | | 81 | Nome | 10. Name and Address of New Register | ed Agent | |
| MEROLA, JAMES R STE. 204, 11380 PROSPERITY FARMS RD. | | | | ٠٠ | Name | | | |
| | | | | 82 | Street Addre | Street Address (P.O. Box Number is Not Acceptable) | | |
| | | | | _ | | <u> </u> | | |
| PALM BEACH GARDENS FL 33410 | | | 1 | 83 | İ | • | | } |
| | | | | 84 | City | | 85 Zip (| Code |
| | | FOO COZ 4508 Florido Status | loo the ab | | named com | oration submits this statement for the purposen's board of directors. I hereby accept the ap | e of changing its | registered |
| SIGNATURE | m familiar with, and accept the obli | gent and title if applicable (NOTE | | | nt signature required | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | | | ADDITIONS/CHANGES TO OFFICERS | | DRS IN 12 Addition |
| TITLE | - | | 1.1 TITU | 1.1 TITLE | | | ☐ Change | Addition |
| NAME | SEASE, WALLACE C | | 1.2 NA | | | | | |
| STREET ADDRESS | 3450 MARTIN LUTHER KING | JR. BLVD. | 1.3 STF | REET | ADDRESS | | | · [|
| CITY-ST-ZIP | RIVIERA BEACH FL 33404 | | 1.4 CIT | | T- ZIP | | - Characa | ☐ Addition |
| TITLE | ☐ DELETE 2 | | 2.1 TITI | 2.1 TITLE | | | ☐ Change | L_J Addition |
| NAME | | | 2.2 NA | 2.2 NAME | | | | ļ |
| STREET ADDRESS | | | 2.3 STF | REET | TADDRESS | ما يا دار دار | سسدريك ا | ~ |
| CITY-ST-ZIP | | | | 2. 4 CITY-ST-ZIP | | | | - Addition |
| TITLE | ☐ DELETE 3.1 | | 3.1 TITT | 3.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 3.2 NAJ | | | • | | |
| STREET ADDRESS | | | 3.3 STF | REET | TADDRESS | | | |
| CITY-ST-ZIP | | | 3.4. CIT | 3.4. CITY-ST-ZIP | | | | |
| TITLE | | | 4.1 TITI | 4.1 TITLE | | | Change | ☐ Addition |
| NAME | | | 4.2 NA | | | | | \ |
| STREET ADDRESS | | | 4 3 STF | REET | TADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CIT | _ | T-ZIP | | F7.0b | ☐ Addition |
| TITLE | | ☐ DELETE | 5.1 T/T | | | | Change | |
| NAME : | | | 5.2 NAI | | | | | į |
| STREET ADDRESS | | | 1 | | TADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CIT | | T- ZIP | | | |
| TITLE | | | 6.1 TIT | LE | ì | | ☐ Change | ☐ Addition |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE