

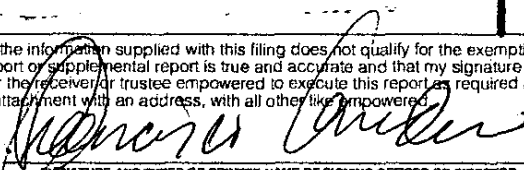


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90030 002 ***150.00

DOCUMENT # P97000045319 1. Entity Name S.C. EQUIPMENT & PARTS, INC.		
Principal Place of Business 331 SW 136 CT 3251 W. OKEECHOO MIAMI, FL 33125 012		Mailing Address 331 SW 136 CT 3251 W. OKEECHOO MIAMI, FL 33125 012
6. Name and Address of Current Registered Agent CASAS, EDWARD 6039 COLLINS AVE #1034 MIAMI BEACH, FL 33148		<div style="text-align: center;">  </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> 01282004 No Chg-P CR2E034 (10/03) </div> <div style="display: flex; margin-top: 5px;"> <div style="flex: 1;"> 4. FEI Number 65-0758513 </div> <div style="flex: 0.5; border: 1px solid black; padding: 2px;"> Applied For Not Applicable </div> </div> <div style="display: flex; margin-top: 5px;"> <div style="flex: 1;"> 5. Certificate of Status Desired <input type="checkbox"/> </div> <div style="flex: 0.5; border: 1px solid black; padding: 2px;"> \$8.75 Additional Fee Required </div> </div>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORREDERO, FRANCISCO 331 SW 136 CT 3251 W. OKEECHOO RD MIAMI, FL 33125 012	
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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:  FRANCISCO CORREDERO <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		