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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Feb 06 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000053176 (8)

E & P EQUIPMENT & PARTS EXPORT, INC.

Principal Place of Business Mailing Address									
			55 W 50TH ST						
HIALEAH FL	33012	HIALEAH FL 33012					DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							06/16/1997		
	Place of Business	2a. Mailin	g Address				4. FEI Number Applied For	_	
21		26				65-0759652 Not Applica	ble		
Suite, Apt. #, etc.		27 Suite,	Suite, Apt. #, etc.				5. Certificate of Status Dosired		
City & State		City & State					Election Campaign Financing \$5.00 May Be		
Zip Country		Zip Country					Trust Fund Contribution Added to Fees		
24	25	29	¬				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9. Name and Address of Current					10. Name and Address of New Registered Agent			
C	AMACHO, PEDRO E			81	N	lame			
255 W 50TH ST			82	S	treet Addres	ess (P.O. Box Number is Not Acceptable)			
HIALEAH FL 33012				83	_				
ŀ				ြီ					
				84	C	lity	EI 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,				s, the above	L o-na	med corpo	oration submits this statement for the purpose of changing its registered	əd	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agon., or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
12.	Signature, typed of proted name of regetered agent OFFICERS AND		HOOTE:	flog-stered Age	ent sig	gnature required	d when reinstating) DATE		
TITLE	PLESIDENT	DIRECTORS	☐ DELF TE	1.1 DILE			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addit	ion	
NAME	PEDNO E. CAMAS	Ho		1.2 NAME					
STREET ADDRESS	7-	(-	_	1 3 STREET	ADDI	RESS			
CITY-ST-ZIP	255 W. SOST, HALE VICE PLES. ODALIS CAMACHO	74-17, fic.	33012	1.4 C/TY - S	T - 7 F	P			
TITLE	VICE PLES.	·	L DELETE	2.1 TITLE			Change Addit	.on	
NAME	ODALIS CAMACHO			2 2 NAME					
STREET ADDRESS	255 W. 50 ST. HIAL	FL. 3	3012	2.3 STREET		1			
CITY-ST-ZIP	3	<u> </u>	DELETE	2. 4 CITY - S 3.1 TITLE	51 - 21	IF	☐ Change ☐ Addit	ion	
NAME				3.2 NAME			_ · · -		
STREET ADDRESS				3.3 STREET	ADDI	RESS			
CITY-ST-ZIP				3.4. CITY - S	31 - 7	P			
TITLE			☐ DELFTE	4.1 THILE		1	☐ Change ☐ Additi	on	
NAME				4. 2 NAME	. Dr.	0500			
STREET ADDRESS City-St-Zip				4.3 STREET . 4.4 CITY - ST					
TITLE	<u> </u>		DELFTE	5.1 TITLE	(* ZIP	·	☐ Change ☐ Additi	on	
NAME				5.2 NAME			_ · · · ·		
STREET ADDRESS				5.3 STREET	ADDE	RESS			
CITY-ST-ZIP	·			5.4 CITY - ST	1 - ZIP	,			
TITLE			DELETE	6.1 TITLE			Change Additi	on	
NAME				6.2 NAME					
STREET ADDRESS				63 STREET	ADDA	RESS			

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 of 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 of 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 attach neith with an address