PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000015651

GLOBAL EQUIPMENT INTERNATIONAL, INC.

Principal Place of Business	
2550 S.E. CLAYTON STREET	

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90191 019 ***150.00



Principal Place	of Business	Mailing Address						
2550 S.E. CLAY		2550 S.E. CLAYTON STREET STUART FL 34997						
STUART FL 349	197 ·				DO NOT WRITE IN THIS SPACE			
					. 3. Date Incorporated or Qualifed	L 114 11 110 0	TOL	
					02/16/1998			
		1			the state of the s		7 0	alle d F
	lace of Business	2a. Mailing Address	J	1	4. FEI Number			plied For
21 1930	AVENUE L	26 19 30 AVEN	iue_	<u> </u>	65-0836008			ot Applicable
Suite, Apt. # etc. 22 WEST PALM BEACH, FL 2		26 1930 AVENUE L Suite Apt. #, etc. 27 WEST PALM BEACH, FL		5. Certifcate of Status Desired		□ \$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing		\$5.00	May Be	
33404		28 33404		Trust Fund Contribution Added to Fees				
Zip			Country		8. This corporation owes the current year Intangible Norsult:			
	25	29 30	· ·		Personal Property Tax.	[Yes	□No
24	9. Name and Address of Current		' 		10. Name and Address of New R	egistered A	ent	
	9. Name and Address of Current	Negisteres Agent	81	Name	10.	1		
PATI	RICK, TERRELL S							
	S.E. CLAYTON STREET		82 Street Add		idress (P.O. Box Number is Not Acceptable)			
	ART FL 34997		<u> </u>		<u> </u>			
310	HIT IL 34991		83					
		·	84	City			85 Zip	Code
			04	City	•	FL	55 2.5	-
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the abov	e-named co	rporation submits this statement for the	ourpose of cl	nanging its	registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was autho	orized by	the corpora	tion's board of directors. I hereby accept	t the appoint	ment as re	egistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Rec	nistered Ager	nt signature requi	ired when reinstating)	DATE		}
40	OFFICERS AND		13.	n organization or organ	ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	ORS IN 12
12.	D OTTOERS AND	DELETE	1.1 TITLE		ADDITIONOS INCIDED TO CO.		Change	☐ Addition
	•		1.2 NAME	1				_
NAME	PATRICK, TERRELL S	-			•			
STREET ADDRESS	4092 S.W. MCCANDLESS STRE	^{E1}		T ADDRESS				
CITY-ST-ZIP	PORT ST. LUCIE FL 34953		1.4 CITY-S	T-ZIP			Chases	Addition
TITLE	D	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	MUOIO, PASCAL	•	2.2 NAME		•			ļ
STREET ADDRESS	1270 S.W. 19 STREET		2.3 STREE	T ADDRESS				1
CITY-ST-ZiP	BOCA RATON FL 33486		2. 4 CITY-5	ST-ZIP				
TITLE	7 A 2 #	☐ DELETE	3.1 TITLE		The first of the second of the	The same of the same of	Change	` ☐ Addition
NAME			3.2 NAME					ļ
			Ī	T ADDRESS				1
STREET ADDRESS			t					}
CITY-ST-ZIP		☐ DELETE	3.4. CITY-5	51-ZIP	·		Change	Addition
TITLE			4.1 TITLE					
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME					Į.
STREET ADDRESS			5.3 STREE	TADDRESS				
			5.4 CITY-S	it-zip				
CITY-ST-ZIP		□ DELETE	6.1 TITLE				☐ Change	Addition
TITLE			62 NAME					
NAME	}			TADODECC				1
STREET ADDRESS				TADDRESS				
			64 CITY-S	T 710 1				

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.

SIGNATURE: