

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90080 037 ***150.00

DOCUMENT # P98000074148

1. Entity Name
MIAMI EQUIPMENT & TRUCKS, INC.

Principal Place of Business

9500 NW 58 STREET
MIAMI FL 33178

Mailing Address

9500 NW 58 STREET
SUITE 403
MIAMI FL 33178

2. Principal Place of Business

8460 NW 58th ST

3. Mailing Address

2100 W 76 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

401

City & State

MIAMI FL

City & State

HIALEAH FL 33016

4. FEI Number 65-0860334

Applied For

Not Applicable

Zip

33166

Country

MIAMI DAO

Zip

33016

Country

MIAMI DAO

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

6. Name and Address of Current Registered Agent

PORTNOY, JOSE
2100 WEST 76TH STREET
SUITE 403
HIALEAH FL 33016-5504

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE PD ☐ **Delete**
NAME PORTNOY, JOSE
STREET ADDRESS 2100 WEST 76TH STREET #403
CITY-ST-ZIP HIALEAH FL 33016

TITLE TD ☐ **Delete**
NAME ALVARADO, MIGDALIA
STREET ADDRESS 2100 WEST 76TH STREET #403
CITY-ST-ZIP HIALEAH FL 33016

TITLE VPS ☐ **Delete**
NAME NAVARRO, DANIEL H
STREET ADDRESS 9500 N.W. 58 STREET
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
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TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/02 (305) 231-7757
Date Daytime Phone #

CR2E034 (9/01)