2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

changed, or on an attachment with an ad-

SIGNATURE:

all other like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

MANIEL HAUDRONO

Apr 22, 2004 8:00 am Secretary of State **DOCUMENT # P98000074148** 04-22-2004 90057 025 ***150.00 MIAMI EQUIPMENT & TRUCKS, INC. Principal Place of Business Mailing Address 8460 NW 58TH ST. 2100 W 76 ST MIAMI FL 33166 SUITE 401 HIALEAH FL 33016 2. Principal Place of Business 3. Mailing Address Suite Apt #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 65-0860334 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PORTNOY, JOSE 2100 WEST 76TH STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 403 HIALEAH FL 33016-5504 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition ☐ Delete TITLE TITLE Change PORTNOY, JOSE NAME NAME 2100 WEST 76TH STREET #403 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33016 CITY-ST-ZIP TD Defete TITLE ☐ Change ☐ Addition TITLE ALVARADO, MIGDALIA NAME NAME STREET ADDRESS 2100 WEST 76TH STREET #403 STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33016 CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAVARRO, DANIEL H NAME 8460 NW 58 STREET STREET ADDRESS STREET ADDRESS 9500 N.W. 58 STREET MIAMI FI 33166-3302 CITY-ST-ZIP CITY - ST-7IP MIAMI FL 33178 Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP 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

FILED

305-717.1576

Daytime Phone #

4/20/2004