

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P99000018878

1. Entity Name
MASTER TRANSPORT EQUIPMENT CORP.



Principal Place of Business

3755 NW 62 ST
MIAMI, FL 33147

Mailing Address

3038 NW NORTH RIVER DR
MIAMI, FL 33142 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03192004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0097587

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ, EDELMIRO
3038 NW NORTHRIVER DR
MIAMI, FL 33142

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. 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)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CD ☒ Delete
NAME BABUN, JOSE
STREET ADDRESS 3160 NW 14TH ST
CITY-ST-ZIP MIAMI, FL

TITLE P ☐ Delete
NAME BABUN, SARA C
STREET ADDRESS 3038 NW NORTH RIVER DR
CITY-ST-ZIP MIAMI, FL 33142

TITLE D ☐ Delete
NAME BABUN, JOSE J
STREET ADDRESS 2945 NW 21 TERR
CITY-ST-ZIP MIAMI, FL

TITLE D ☐ Delete
NAME BABUN, MIREYA
STREET ADDRESS 1714 FERDINAND ST
CITY-ST-ZIP CORAL GABLES, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V.P. OPERATIONS ☐ Change ☒ Addition
NAME LINCOLN BABUN
STREET ADDRESS 3038 N.W. NORTH RIVER DRIVE
CITY-ST-ZIP MIAMI, FL 33142

TITLE CHAIRMAN & DIRECTOR ☒ Change ☐ Addition
NAME JOSE BABUN
STREET ADDRESS 3038 N.W. NORTH RIVER DR.
CITY-ST-ZIP MIAMI, FL 33142

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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

President

3/30/04

(305)633-6361

Jose C. Babun

Date

Daytime Phone #

FILED

04 APR 22 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

