

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 23, 2001 08:00 AM
Secretary of State

DOCUMENT # P99000045577

1. Entity Name
EQUIPMENT OUTLET EXPRESS, INC.

Principal Place of Business

5331 VISTA CLUB RUN

LAKE FOREST

32771

FL

Mailing Address

5331 VISTA CLUB RUN

LAKE FOREST

32771

FL

2. Principal Place of Business

125 COASTLINE ROAD

Suite, Apt. #, etc.

1200

City & State

SANFORD

FL

Zip

32771

Country

3. Mailing Address

125 COASTLINE ROAD

Suite, Apt. #, etc.

1200

City & State

SANFORD

FL

Zip

32771

Country

4. FEI Number

65-0918911

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LEVISON DAVID M
5331 VISTA CLUB RUN

LAKE FOREST

32771

FL

7. Name and Address of New Registered Agent

Name

LEVISON DAVID M

Street Address (P.O. Box Number is Not Acceptable)

125 COASTLINE ROAD

1200

City

SANFORD

FL

Zip Code

32771

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 DAVID M LEVISON

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

(NOTE: Registered Agent signature required when reinstating)

05/23/2001

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, 2001 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 D ☐ Delete
NAME LEVISON DAVID M
STREET ADDRESS 5331 VISTA CLUB RUN
CITY-ST-ZIP LAKE FOREST FL 32771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRIS ☒ Change ☐ Addition
NAME LEVISON DAVID M
STREET ADDRESS 5331 VISTA CLUB RUN
CITY-ST-ZIP LAKE FOREST FL 32771

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

TITLE ☐ Change ☐ Addition
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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: DAVID M LEVISON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRS

05/23/2001

Date

Daytime Phone #

CR2E034 (11/00)