

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 09 1997 8:00am
Secretary of State

DOCUMENT # S03607 (6)

1. Corporation Name

CAMPO EQUIPMENT & PARTS INCORPORATED

Principal Place of Business

0535 NW 58TH STREET
MIAMI FL 33166
US

Mailing Address

0535 NW 56TH STREET
MIAMI FL 33166-3328
US

2. Principal Place of Business

21 9600 NW 25 Street

Suite, Apt. #, etc.

22 3D

City & State

23 MIAMI, FL

Zip

24 33144

Country

25 USA

2a. Mailing Address

26 9600 NW 25 ST

Suite, Apt. #, etc.

27 3D

City & State

28 MIAMI, FL

Zip

29 33144

Country

30 USA

3. Date Incorporated or Qualified

10/01/1990

3a. Date of Last Report

03/12/1996

4. FEI Number

65-0228112

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

CAMPO, LUIS
7535 BW 58TH STREET
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name CAMPO, LUIS

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

83 9600 NW 25 ST STE 3D

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/25/97
DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME D CAMPO, LUIS
STREET ADDRESS 8300 NW 25TH STREET, 107
CITY-ST-ZIP MIAMI FL

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 attached report with an address.

SIGNATURE

SIGNATURE

4/25/97

593-6957

CR2E034 (9/96)