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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(6)

BARONE EQUIPMENT SALES COMPANY

FILED Apr 22 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address							1 (821/8/9 M) (821/40) 8 8 M (80) 8 8 M (80) 8 M		
4739 TRANSP BUILDING 5 TAMPA FL 33			BUILD	4739 TRANSPORT DR BUILDING 5 TAMPA FL 33605				DO NOT WRITE IN THIS SPACE	
US			US					3. Date Incorporated or Qualified	
2 Olaska d D	to a of Direct		0- 14-	Since Address				08/29/1991 4. FEI Number Applied For	
2. Principal P	ace or Busi	ness	<u> </u>	iling Address					
21 Suite, Apt.	# etc			Suite, Apt #, etc.				¢0.75 Additional	
22	n, 010.		27					5. Certificate of Status Desired Fee Required	
City & State	6			City & State				Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
Zip	Zip Country			Zip Country				This corporation owes or has paid the current year Intangible	
24	25 29 30 30 Name and Address of Current Registered Agent			30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
			rent Hegistere	a Agent		81	Name		
	RONE, JOH								
	7 QLENC	RACE FL 33617					Street Address (P.O. Box Number is Not Acceptable)		
167	WPUS IENF	VIOE FL 33017				83			
							04.	lock 7in Code	
						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	iiii (g illiiidi w	itit, and accept the or	iligations of, se	Chon Cor. 0505, i	orida ola	tutea	.		
SIGNATURE	Signature, typed	for printed name of registered	agent and title if app	ON) aldabile	11: Registere	d Age	nt signat∪re r	o required when reinstating) DATE	
12.		OFFICERS.	AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST DELETE				1.1 10			Change Addition	
NAME	BARONE, JOHN ESS 6607 GLENCOE DR			1.2 N/					
STREET ADDRESS		TERRACE FL					ADDRESS		
CITY-ST-ZIP TITLE	TEMPLE	TENNAUE PL	· · · · · · · · · · · · · · · · · · ·	DELETE	2.1 1	ITY - S' ITLE	1-211	Change Addition	
NAME					2.2 N		1		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP							ST-ZIP		
TITLE				DELETE	3.1 Ti			Change Addition	
NAME					3.2 N	AME	l		
STREET ADDRESS					3.3 \$	TREET	ADDRESS		
CATY-ST-ZIP	,				3.4. 0	CITY-S	T-ZIP		
TITLE				☐ DELETE	4.1 30	TLE		☐ Change ☐ Addition	
NAME					4. 2 N	NAME	1		
STREET ADDRESS					4.3 S	TREET	ADDRESS		
CITY-ST-ZIP						ITY - S	T-ZIP		
TITLE				DELETE	5.1 31		-	☐ Change ☐ Addition	
NAME					5.2 N		- 1		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP				DELETE		ITY-S	T-ZIP	Change	
TITLE				☐ DELETE	6.1 %			Change Addition	
NAME					6.2 N				
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP	<u> </u>				6.4 C	ITY - S	T-ZIP		

14. Thereby 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 it changes or on in intrachment with an address.