

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY 15 1995

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V37827** (5)

1. Corporation Name

UNITED SERVICES EQUIPMENT BROKERS, INC.

Principal Place of Business

**176 FAIRVILLE ROAD
CHADDSFORD PA 33415-6015
US**

Mailing Address

**6383 TENTH AVE NO
STE C
GREENACRES FL 33463-1689
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/18/1992	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0330921	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
7. This corporation has liability for nonpayment of taxes under Chapter 218, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent

**REYNOLDS, LORRAINE F.
6383 TENTH AVE NORTH
STE C
GREENACRES FL 33463**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	
FL	85. Zip Code

11. Pursuant to the provisions of Sections 607.0402 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 the foregoing Florida Statutes.

SIGNATURE

(Signature of Agent, if Agent is not a corporation, must be signed by the Agent)

(Signature of Registered Agent, if Agent is a corporation, must be signed by the Agent)

(Signature of Secretary of State, if Agent is a corporation, must be signed by the Secretary of State)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	PS	1. TITLE	☐ Change ☐ Addition
2. NAME	DAMATO, HARRY	2. NAME	
3. STREET ADDRESS	176 FAIRVILLE ROAD	3. STREET ADDRESS	
4. CITY, ST, ZIP	CHADDS FORD PA	4. CITY, ST, ZIP	
5. TITLE		5. TITLE	☐ Change ☒ Addition
6. NAME		6. NAME	LORRAINE F. REYNOLDS
7. STREET ADDRESS		7. STREET ADDRESS	6383-C TENTH AVE NO
8. CITY, ST, ZIP		8. CITY, ST, ZIP	GREENACRES FL 33463-1689
9. TITLE		9. TITLE	☐ Change ☐ Addition
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, ST, ZIP		12. CITY, ST, ZIP	
13. TITLE		13. TITLE	☐ Change ☐ Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY, ST, ZIP		16. CITY, ST, ZIP	
17. TITLE		17. TITLE	☐ Change ☐ Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and correct and equally for the verification stated in Section 607.0402, Florida Statutes. I further certify that the information was filed on the annual report or supplementary annual report in triplicate and a copy and that my signature shall have the same legal effect as it would under oath that I am an officer or director of the corporation or the secretary or the person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on any other filing with this department.

SIGNATURE:

(Signature and Typed or Printed Name of Signing Officer or Director)

5/4/95

407-966-1100