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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # V67616

(5)

SOUTHEAST EQUIPMENT DISTRIBUTING CO.

## FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 300 TECHNOLOGY PARK 300 TECHNOLOGY PARK LAKE MARY FL 32746 LAKE MARY FL 32746 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 09/29/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3144446 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MOTOLAW, INC. %MILAM OTERO LARSEN DAWSON & TRAYLOR, P.A. Street Address (P.O. Box Number is Not Acceptable) 1301 RIVERPLACE BLVD., SUITE 1301 83 JACKSONVILLE FL 32207 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) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ■ DELETE TITLE 1.1 TITLE Change Addition BRUNS, THOMAS V NAME 1.2 NAME 300 TECHNOLOGY PARK STREET ADDRESS 1.3 STREET ADDRESS LAKE MARY FL CITY-ST-ZIF 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition ALVAREZ, JOSE F NAME 2.2 NAME 300 TECHNOLOGY PARK STREET ADDRESS 2.3 STREET ADDRESS LAKE MARY FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP TITLE DELETE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE Change 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 as the 15 ceiver 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 as attachment with an address.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADORESS

NAME

TITLE

NAME

1/13/98

Change

Change

Addition

Addition