

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

5-1-96 B-5187 C
(9)

DOCUMENT # H03358

1. Corporation Name

H. L. STOLOFF SALES INCORPORATED



Principal Place of Business: C/O H. L. STOLOFF SALES, INC. 1974 GEORGIA CIRCLE NORTH CLEARWATER FL 34620
Mailing Address: C/O H. L. STOLOFF SALES, INC. 1974 GEORGIA CIRCLE NORTH CLEARWATER FL 34620

3. Date Incorporated or Qualified: 05/14/1984
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2418158
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

2. Principal Place of Business (21-24)
2a. Mailing Address (26-30)
22. Suite, Apt. #, etc.
27. Suite, Apt. #, etc.
23. City & State
28. City & State
24. Zip, Country
29. Zip, Country

9. Name and Address of Current Registered Agent
STOLOFF, H. L.
1974 GEORGIA CIRCLE NORTH
CLEARWATER FL 34620

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code (FL)

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS
TITLE: PD
NAME: STOLOFF, H L
STREET ADDRESS: 1974 GEORGIA CIRCLE N
CITY-ST-ZIP: CLEARWATER FL
[] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE [] Change [] Addition
2. NAME [] Change [] Addition
3. STREET ADDRESS [] Change [] Addition
4. CITY-ST-ZIP [] Change [] Addition
5. TITLE [] Change [] Addition
6. NAME [] Change [] Addition
7. STREET ADDRESS [] Change [] Addition
8. CITY-ST-ZIP [] Change [] Addition
9. TITLE [] Change [] Addition
10. NAME [] Change [] Addition
11. STREET ADDRESS [] Change [] Addition
12. CITY-ST-ZIP [] Change [] Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE: *Harvey L. Stoloff* PRESIDENT
DATE: 4/27/96
DAYTIME PHONE: 813-52-1748

CR2E034 (12/95)