

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90256 038 ***150.00

DOCUMENT # P03000085133 1. Entity Name APPLIANCE DIRECT XII, INC					
Principal Place of Business 397 N. BABCOCK STREET MELBOURNE, FL 32935 US			Mailing Address 397 N. BABCOCK STREET MELBOURNE, FL 32935 US		
2. Principal Place of Business 323 East Merritt Island Dr Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Merritt Island FL		City & State 		4. FEI Number 20-0129763	
Zip 32952		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOUVIER, PAUL A 3210 N. WICKHAM ROAD, 5 MELBOURNE, FL 32935			7. Name and Address of New Registered Agent Name Dave Presnick 96 Williard Street, Suite 302 Cocoa, FL 32922 City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>David M Presnick</i></u> (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Samuel Pak</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u><i>4/30/04</i></u> Daytime Phone #		