

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90272 049 ***150.00

REGISTRATION

DOCUMENT # P98000019360
 1. Entity Name
ABC DISCOUNT APPLIANCES, INC.

Principal Place of Business Mailing Address
4444 US 27 SOUTH **4444 US 27 SOUTH**
SEBRING FL 33870 **SEBRING FL 33870**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
13611 US Hwy 98 **13611 US Hwy 98**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
SEBRING, FL **Sebring, FL**
 Zip Country Zip Country
33876 **Highlands** **33876** **Highlands**

4. FEI Number Applied For
65-0831393 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
PRICE, ALAN E
4444 US 27 SOUTH
SEBRING FL 33870

7. Name and Address of New Registered Agent
 Name **ALAN E. PRICE**
 Street Address (P.O. Box Number is Not Acceptable)
13611 US Hwy 98
 City **Sebring, FL** **FL** Zip Code **33876**

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.
 SIGNATURE: DATE: **1/9/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PRICE, ALAN E 4444 US 27 SOUTH SEBRING FL 33870
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PRICE, ALAN E. 13611 US Hwy 98 Sebring, FL 33876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ALAN E. PRICE** **1/9/02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CRE034 (9/01)