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AND
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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # 160724 (1)

1. Corporation Name
GENERAL APPLIANCE CO.

Principal Place of Business
**DBA KEENAN'S
1105 N.E. 13TH ST.
FT LAUDERDALE FL 33304**

Mailing Address
**DBA KEENAN'S
1105 N.E. 13TH ST.
FT LAUDERDALE FL 33304**

2. Principal Place of Business
21 [] Suite, Apt. #, etc.
22 [] City & State
23 [] Zip [] Country

2a. Mailing Address
26 [] Suite, Apt. #, etc.
27 [] City & State
28 [] Zip [] Country

3. Date Incorporated or Qualified
03/04/1950

3a. Date of Last Report
02/14/1994

4. FEI Number
59-0610487

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 intangible tax under S. 109.002, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**PULEO, ANTHONY N.
4402 NW 43RD TERRACE
TAMARAC FL 33319**

10. Name and Address of New Registered Agent

81 Name
John J. Keenan

82 Street Address (P.O. Box Number is Not Acceptable)
5290 S.W. 4 Court

83 []

84 City
Fort Lauderdale **FL** 85 Zip Code
33317

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: *John J. Keenan* **John J. Keenan Director** **April 20, 1995**

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	KEENAN, JOHN J
STREET ADDRESS	5290 S.W. 4TH CT.
CITY - ST - ZIP	FORT LAUDERDALE FL
TITLE	PT
NAME	PULEO, ANTHONY N.
STREET ADDRESS	4402 NW 43RD TERRACE
CITY - ST - ZIP	TAMARAC FL
TITLE	V
NAME	KEENAN, JEANNE L
STREET ADDRESS	5290 S.W. 4TH COURT
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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: *Anthony N. Puleo* **Anthony N. Puleo President** **April 20, 1995**

305 764-2655