

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 176242 (6)

1. Corporation Name
WEEKS BOTTLEGAS & APPLIANCE COMPANY

Principal Place of Business 2828 N.W. 17TH AVENUE 9301 S W 56TH ST MIAMI FL 33142	Mailing Address 2828 N.W. 17TH AVENUE MIAMI FL 33142-6630 US
---	--



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/25/1953		3a. Date of Last Report 03/26/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-0704162		Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent ROSEN,ARNOLD P 2828 N.W. 17TH AVENUE MIAMI FL 33142				10. Name and Address of New Registered Agent			
				81 Name JEFFREY S. MILLER			
				82 Street Address (P.O. Box Number is Not Acceptable) 2828 NW 17 AVE.			
				83 90 Weeks Gas.			
				84 City MIAMI FL 85 Zip Code 33142			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation solemnly and truly swears that the information furnished in 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: **JEFFREY S. MILLER - President** DATE: **4-10-97**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	STD	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	President	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ROSEN, ARNOLD P			1.2 NAME	JEFFREY S. miller		
STREET ADDRESS	2828 N.W. 17TH AVENUE			1.3 STREET ADDRESS	55 E. SAN MARINO		
CITY-ST-ZIP	MIAMI, FL 00000			1.4 CITY-ST-ZIP	MIAMI Bch, FL 33139		
TITLE	D	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	Vice-President	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	MILLER, SUSAN			2.2 NAME	Joe R. RODRIGUEZ		
STREET ADDRESS	2828 N.W. 17TH AVENUE			2.3 STREET ADDRESS	15046 SW 148 St		
CITY-ST-ZIP	MIAMI, FL 00000			2.4 CITY-ST-ZIP	MIAMI, FL 33196		
TITLE	PD	<input type="checkbox"/> DELETE		3.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MILLER, LEONARD			3.2 NAME	LEONARD MILLER		
STREET ADDRESS	2828 N.W. 17TH AVENUE			3.3 STREET ADDRESS	2828 NW 17 Ave.		
CITY-ST-ZIP	MIAMI, FL 00000			3.4 CITY-ST-ZIP	MIAMI, FL 33142		
TITLE	D	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	DIRECTOR	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ROSEN, MURIEL S			4.2 NAME	STUART MILLER		
STREET ADDRESS	2828 N.W. 17TH AVENUE			4.3 STREET ADDRESS	2828 NW 17 Ave		
CITY-ST-ZIP	MIAMI, FL 00000			4.4 CITY-ST-ZIP	MIAMI, FL 33142		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	Director	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				5.2 NAME	Steve SAIONTZ		
STREET ADDRESS				5.3 STREET ADDRESS	2828 NW 17 Ave.		
CITY-ST-ZIP				5.4 CITY-ST-ZIP	MIAMI, FL 33142		
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 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 unchanged, or on an attachment with an address.

SIGNATURE: **JEFFREY S. MILLER** DATE: **4-10-97**

CR2E034 (9/96)