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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

182095

(0)

PALM BEACH BUILDING DISPLAY CENTER INC

FILED Mar 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 109101 1000 1000 1000 1000 1000 1000	filli atl		
129 S. GOLFI LAKE WORTH			129 S. GOLFVIEW DRIVE LAKE WORTH FL 33460			DO NOT WRITE IN THIS SPACE	Œ		
						3. Date Incorporated or Qualified			
						12/13/1954			
2. Principal P	lace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number	Applied For		
21	26				59-0727422	N ₁	ot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	_	Additional equired	
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees			
Zip	Country Zip		Cou	Country		8. This corporation owes or has paid the current	year in	tangible	
24	25	25 29 30				Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	nt Registered Agent		81		10. Name and Address of New Registered Ager	rt		
DOTTOR,VICTOR					Name				
129 SOUTH GOLFVIEW APT #9				B2 Street Add		dress (P.O. Box Number is Not Acceptable)			
LAKE WORTH FL 33460						,			
				63					
				84	City	85	7:5	Code	
				54	City	FL [®]	, EID	0006	
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	Signature, typed or printed name of registered egi	ent and title # applicable. (NO	TE Registered	d Age	nl signature requ	uired when reinstating) DATE		,	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTOF	RS IN 12	
TITLE	PD	PD DELETE 1.1		1.1 TITLE			Change	Addition	
NAME	DOTTOR, VICTOR F.		1.2 NAMI					13	
STREET ADDRESS	129 S. GOLFVIEW DRIVE	1.3		1.3 STREET ADDRESS				i	
CITY-ST-ZIP	LAKE WORTH FL		1.4 CI	TY - S'	T-ZIP		•	13	
TITLE	D	☐ DELETE	2.1 TI	TLE			Change	☐ Addition (
NAME	DOTTOR, VICTOR R.	DTTOR.VICTOR R. 22		2.2 NAME				- 1	
STREET ADDRESS	8420 N LAKE CLARK DR		2.3 \$1	2.3 STREET ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL			2. 4 CITY - ST - ZIP					
TITLE	SD			3.1 TITLE			Change	☐ Addition	
NAME	II		3.2 NA	3.2 NAME				ſ	
STREET ADDRESS	6520 N. LAKE CLARK DR.		3.3 STREE		ADDRESS				
CITY+ST-ZIP	WEST PALM BEACH FL		3.4. C	ffY-S	ST-ZIP				
TITLE	7	DELETE	4.1 TI	rle			Change	Addition	
NAME -	POHL, CAROL		4.2 N	AME	İ				
STREET ADDRESS	129 S. GOLFVIEW DRIVE		4.3 ST	REET	ADDRESS			1	
CITY-ST-ZIP	LAKE WORTH FL		4.4 CI	TY-\$1	T-ZIP				
TITLE		☐ DELETE	5.1 10	TLE.			Change	Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET	ADDRESS			İ	
CITY-ST-ZIP			5.4 01	TY-SI	T-ZIP				
TITLE		DELETE	6.1 Trī	ILE			Change	☐ Addition	
NAME			6.2 NA	ME				1	
STREET ADDRESS			6.3 ST	REET	ADDRESS			.	
CITY-ST-ZIP			6.4 CI					i	
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify t	for the exe	mpt	ion stated in	n Section 119.07(3)(i), Florida Statutes. I further certify t	hat 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: (1/20/08) 9 91

3-11-98