

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

FILED

Feb 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 396696 (7)  
1. Corporation Name  
STOCK INDUSTRIES, INC.

Principal Place of Business  
3100 PALM AIRE DRIVE NORTH  
POMPANO BEACH FL 33069-3849

Mailing Address  
BOX 1718  
POMPANO BEACH FL 33061  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 90 MEDOFF CPA Suite, Apt. #, etc. 22 1350 S Powerline Rd 106 City & State 23 Pompano Beach FL Zip 24 33069 Country 25 USA	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	3. Date Incorporated or Qualified 03/02/1972 4. FEI Number 06-0666873 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

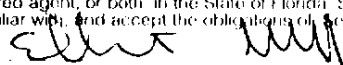
STOCK, HERMAN E  
3100 PALM AIRE DRIVE N.  
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name  
ELLIOT MEDOFF  
82 Street Address (P.O. Box Number is Not Acceptable)  
1350 S POWERLINE Road # 106  
83  
84 City Pompano Beach FL 85 Zip Code 33069

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 (Type of the printed name of registered agent and the date)

(NOTE: Registered Agent signature required when reinstating)

DATE

2/16/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STOCK, HERMAN E	1.2 NAME	
STREET ADDRESS	3100 PALM AIRE DR N	1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BCH, FL 00000	1.4 CITY-ST-ZIP	
TITLE	VP and SD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRANOWITZ, CAROL S	2.2 NAME	
STREET ADDRESS	5710 OLD CHESTER RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BETHESDA, MD 00000 20817	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STOCK, HERMAN E	3.2 NAME	
STREET ADDRESS	3100 PALM AIRE DR N	3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BCH, FL 00000	3.4 CITY-ST-ZIP	
TITLE	SD PD and TD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STERN, ELLEN S.	4.2 NAME	
STREET ADDRESS	585 WEST END AVENUE 12X	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10024	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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 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 if changed, or on an attachment with an address.

SIGNATURE: Carol Stock Kranowitz, V.P. 2/21/98 954-968-4022

CR2E034 (10/97)