

.FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 437750

1. Corporation Name

CONVENIENT HOME DELIVERY CORP.

Principal Place of Business

Mailing Address

**251 KING STREET
CHARLESTON, SC 29401**

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

10-8-73

3-15-95

4. FEI Number

Applied For

Not Applicable

59-1493304

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.03?
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

**Lauren S. Pritz
1244 West University Drive
Plantation, FL 33322**

Pursuant to the provisions of Sections 607.0502 and 607.1501, 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, hereby accept the appointment as registered agent, I am familiar with and accept the obligations of, Section 607.1505, Florida Statutes.

SIGNATURE

DATE

6-28-96

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP
**PRESIDENT
BRUCE KOLTON
251 KING STREET
CHARLESTON, SC 29401**

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

**000001910090
-08/01/96--01009--026
***200.00**

SIGNATURE: **Bruce Kolton**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRUCE KOLTON

4-26-96

803-853-4376

7/31/96

CR2E034 (12/95)