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 # 1. Corporation Name

504736

(0)

ADMANOR	HARDWARE	COMMONNIN
ALIVANU:F	HARIIWARE	THAPPILL

Principal Place	of Business	Maling Address		1 1881A1 Arfal Maint Sibir 18608 life	Main Gener neger ninte brain tribet Albet sodt
6617 SIMM HOLLYWOO	s street DD FL 33024	6617 SIMMS STREET HOLLYWOOD FL 33024	į.		
				3. Date incorporated or Qualified 06/08/1976	3a. Date of Last Report 06/20/1995
2. Principal Pia	ice of Business	2a. Maling Address 26		4, FEI Number 59-1766096	Applied For Not Applicable
Suite, Apt. #	r, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Ζφ	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes	
	g. Name and Address of Curren	t Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
	, Robert E.		82 Street Add	ress (P.O. Box Number is Not Acceptable)
	SOUTHEAST THIRD AVENUE				
FT. LA	uderdale fl		83		
			84 City		85 Zip Code
				- · · · · - · · · · · · · · · · · · · ·	FL
or registere	o the provisions of Sections 607,0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Secti	la Such change was authorized.	the above-hamed corpo by the corporation's boa	ration submits this statement for the purp and of directors. Thereby accept the appoi	ose of changing its registered office intrinent as registered agent. I am
	1, 510 500pt 110 501ga	y restriction, the man distinction.			
SIGNATURE _	Signature: typed or printed habse of respilered agent.	and the diapple acres that the	Registered Agent Signal, renequin	all where recreatings	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	V	DELETE	1 1 DIGE		Change Addition
NAME	BLANDINA, GERALDINE		1.2 NAME		
STREET ADDRESS	6617 SIMMS ST		1.3 STREET ADDRESS		
CITY-S1-ZIP	HOLLYWOOD,FL 00000		1.4 CITY - ST - ZIP		
TITLE	SD	☐ DELETE	2 1 TITLE		Change Addition
NAME	ASTLE, ETHEL M		2.2 NAME		
STREET ADORESS	715 BROOK FOREST CT		2.3 STREET ADDRESS		
City - St - ZiP	APOPKA FL		2 4 CITY - ST - ZIP	e de la companya del la companya de	NA MARKET REPRESENTATION AND THE RESERVE OF THE PROPERTY OF TH
TITLE	PD AOTHE COORDON V	☐ DELETE	3 1 Tille		Change C Addition
NAME	ASTLE, GORDON V		3 2 NAME		
STREET ADORESS	715 BROOK FOREST CT		3.3 STREET ADDRESS		
CITY - ST ZIP	APOPKA FL	FT 071516	3 4 CiTy - ST - 2IF		Chance To Add to
TITLE	ACTIE CODONIS	DELETE	4 1 TIFLE		Change Chaddition
NAME	ASTLE, GORDON S. 1230 OXBOW LANE		4.2 NAME		
STREET ADDRESS	WINTER SPRINGS FL		4.3 STREET ADDRESS		
CITY - ST - ZIP	WINTER SPRINGS FL	FINICI	4.4.0(EY - SE - ZIP		☐ Change ☐ Addition
THILE		☐ DELETE	5 1 TITLE		Change Addition
NAME OTOECT INDOCES			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP THLE		DELFTE	5 4 CHY - ST - ZH 6 1 TITLE		Change Addition
NAME		_] осс п	62 NAME		Commission D Addition
STREET ADDRESS			6.3 STREET ADDRESS		
			6.4 CITY - ST - ZIP		
CITY - ST - ZIP	L		■ 0.9 C(11-3'-7)F		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAM OFFICER OR GIRECTOR

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 obtained, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE SIGNATURE SIGNATURE OF PRINTED NAME OF SIGNATURE OF TIME OF TIME