FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (1)524480 CREM WAREHOUSING INC. Principal Place of Business Mailing Address

May 22 1998 8:00am Secretary of State



30808 US HWY 19 N 30808 US HWY 1 PALM HARBOR FL 34684-4409 PALM HARBOR F					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/20/1977		
2. Principal Place of Business 2a. Mailing Ardress				06 7	4. FEI Number		plied For
21 205 Jarpen Industrial Crel 26 205 Jarper Suite, Apt. #, Ac. Suite, Apt. #, etc.			Industrial Circle			\$8.75	Additional
22 11	/ /	27 Sutto		Certificate of Status Desired	Fee Re	1	
City & State 23 / Askon	Springe Fl	28 1aypon Spring of		6. Election Cempaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24 3468			Countr	SA		Yes [angible] No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name							
SUPPER, KENNETH P.							
30808 US HWY 19 N PALM HARBOR FL 34683			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			83				
			84	City	FL	85 Zip (Code
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 agent	and title if applicable (NOTE	Registered Ac	ant signature require	ed when reinslating) DATE		
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	PTD	DELETE	1.1 TITLE			Change	Addition
NAME	SOPHER, KENNETH P.		1.2 NAME				
STREET ADDRESS	3243 LEPRECHAUN LANE			T ADDRESS			
CITY-ST-ZIP			1.4 CITY- 2.1 TITLE	ST - ZIP		Change	Addition
TITLE NAME	_		2.2 NAME			- V. I.O. III	
STREET ADDRESS	3243 LEPRECHAUN LANE			T ADDRESS			
CITY-ST-ZIP	PALM HARBOR FL		2. 4 CITY				
TITLE	DELETE 3.1					Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY	ST-ZIP		П оь	A dance.
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4, 2 NAMI	- 1			
STREET ADDRESS				T ADDRESS			•
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE	S1-ZIP	,	Change	Addition
TITLE NAME			5.2 NAME	1		- January	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY -				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	ŀ			
STREET ADDRESS			6 3 STREE	T ADDRESS			
CITY-\$T-ZIP			6.4 CITY-	ST-ZIP			

14. Thereby certify that the information supplied with this filing (loes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or suppliented 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.