

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 # 547193 (3)

1. Corporation Name

STUART'S SALES AND SERVICE, INC.



Principal Place of Business

3810 HOLLYWOOD BLVD
HOLLYWOOD FL 33021-3730

Mailing Address

3810 HOLLYWOOD BLVD
HOLLYWOOD FL 33021-3730

3. Date Incorporated or Qualified

09/08/1977

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LARSEN, STUART E
3061 N 35TH ST
HOLLYWOOD FL 33021

81 Name

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 the corporation) (Printed Name of Agent or Signatory Required when Incorporating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	LARSEN, STUART E	3061 N 35TH ST	HOLLYWOOD, FL 00000	☐
D	SOMMER, SANDRA	1149 S NORTHLAKE DR	HOLLYWOOD FL	☐
STD	LARSEN, BONNY L	3061 N 35TH ST	HOLLYWOOD, FL 00000	☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE <td>2.2 NAME<td>2.3 STREET ADDRESS<td>2.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td></td></td>	2.2 NAME <td>2.3 STREET ADDRESS<td>2.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td></td>	2.3 STREET ADDRESS <td>2.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td>	2.4 CITY - ST - ZIP <td>☐</td> <td>☐</td>	☐	☐
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5.1 TITLE <td>5.2 NAME<td>5.3 STREET ADDRESS<td>5.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td></td></td>	5.2 NAME <td>5.3 STREET ADDRESS<td>5.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td></td>	5.3 STREET ADDRESS <td>5.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td>	5.4 CITY - ST - ZIP <td>☐</td> <td>☐</td>	☐	☐
6.1 TITLE <td>6.2 NAME<td>6.3 STREET ADDRESS<td>6.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td></td></td>	6.2 NAME <td>6.3 STREET ADDRESS<td>6.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td></td>	6.3 STREET ADDRESS <td>6.4 CITY - ST - ZIP<td>☐</td><td>☐</td></td>	6.4 CITY - ST - ZIP <td>☐</td> <td>☐</td>	☐	☐

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 the 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 secretary 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-10-96

(305) 989-5222

CR2E034 (12/95)