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Apr 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # G50758 (3)

1. Corporation Name
WALLACE IMPORTS, INC.

Principal Place of Business
I-95 AND LINTON BLVD.
P.O. BOX 8002
DELRAY BEACH FL 33444
US

Mailing Address
LINTON BLVD. & I-95
P.O. BOX 8002
DELRAY BEACH FL 33447-8002
US



2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified 07/21/1983
3a. Date of Last Report 01/26/1996
4. FEI Number 59-2326469
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. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
WALLACE, WILLIAM L.
LINTON BLVD. & I-95
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent
81 Name CT Corporation System
82 Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Rd.
83
84 City Plantation FL 85 Zip Code 33324

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 Victoria Goldstein VICTORIA GOLDSTEIN SPECIAL ASST. SECY 4/2/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PTD	WALLACE, WILLIAM L.	LINTON BLVD. & I-95	DELRAY BCH. FL	<input type="checkbox"/>
AS	WALLACE, KATHLEEN S.	LINTON BLVD. & I-95	DELRAY BCH. FL	<input checked="" type="checkbox"/>
VS	SMITH, LEE	LINTON BLVD. & I-95	DELRAY BEACH FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1	William L. Wallace	I-95 & Linton Blvd.	DeLray Beach, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1	Lee Smith	Linton Blvd. & I-95	DeLray Beach, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1	Richard L. Handley	450 E. Las Olas Blvd. Ste. 1200	St. Lauderdale, FL 33301	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1	Thomas W. Hawkins	450 E. Las Olas Blvd. Ste. 1200	St. Lauderdale, FL 33301	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1	Courtland Reddy	450 E. Las Olas Blvd. Ste. 1200	St. Lauderdale, FL 33301	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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, changed, or on an attachment with an address.

SIGNATURE: *Richard L. Handley* Richard L. Handley 3/2/97 954-713-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)