

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H30256** (2)

1. Corporation Name
TOOLS-N-MORE, INC.



Principal Place of Business 6537 SOUTHERN BLVD., SUITES 3-4 W. PALM BEACH FL 33413	Mailing Address 6537 SOUTHERN BLVD., SUITES 3-4 W. PALM BEACH FL 33413
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/16/1984	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.		4. FEI Number 59-2474447	
22 City & State	27	28 City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23 Zip	28	29 Zip		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24 Country	25	30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VERNER, DEWEY H.
VARNER & STAFFORD, P.A.
2601 10TH AVE. N. SUITE 410
LAKE WORTH FL 33461**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	TREASURER ☐ Change ☒ Addition
NAME	HANSEN, CHARLES F. JR.	1.2 NAME	
STREET ADDRESS	4100 N. OCEAN BLVD. #1402	1.3 STREET ADDRESS	
CITY-ST-ZIP	SINGER ISLAND FL	1.4 CITY-ST-ZIP	
TITLE	PDTS ☐ DELETE	2.1 TITLE	PRESIDENT, SECRETARY, DIRECTOR ☒ Change ☐ Addition
NAME	HANSEN, JUDENE	2.2 NAME	
STREET ADDRESS	4100 N. OCEAN BLVD. #1402	2.3 STREET ADDRESS	
CITY-ST-ZIP	SINGER ISLAND FL	2.4 CITY-ST-ZIP	
TITLE	VPD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DRAGULA, MARK	3.2 NAME	
STREET ADDRESS	4102 INLET CRCL.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

11/11/97 (501) 689-8349

CR2E034 (10/97)