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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

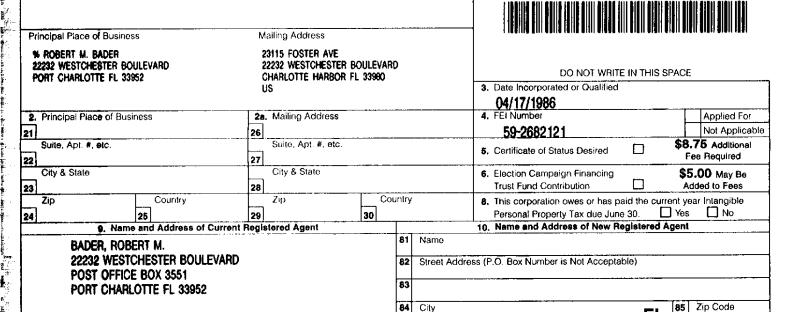
STREET ADDRESS

DOCUMENT # J09643

(4)

ECONOMY SALES AND SERVICE, INC.

FILED Apr 27 1998 8:00am Secretary of State



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 of the purpose of changing its registered of the corporation is board of directors. I hereby accept the appointment as registered

agent. I ar	n fa miliar with, and accept the obligations of, S	ection 607.0505, Flo	rida Statutes.	polation's board of dire	otoro: Triorosy booop	, the appointment as	/ugiototo
SIGNATURE ,	Signature, typed or profind name of registured agent and title if a	ontrable (NOTE	: Registered Agent signature	required when reinstaling)	· · · · · · · · · · · · · · · · · · ·	DATE	
12.	OFFICERS AND DIRECTORS		13. ADDITIONS		CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12
TITLE	T	DELETE	1.1 TITLE			Change	Addition
NAME	KISH, LENA		1.2 NAME				
STREET ADDRESS	22751 BAYSHORE RD		1.3 STREET ADDRESS				
CITY-ST-ZIP	CHARLOTTE HARBOR FL		1.4 CITY - ST - ZIP				
TITLE	Š	DELETE	2.1 TITLE			Change	Addition
NAME	AUCOMPAUGH, ELLANORE		2.2 NAME				
STREET ADDRESS	3096 BROADPOINT DR.		2.3 STREET ADDRESS				
CITY-ST-ZIP	PUNTA GORDA FL		2.4 CITY-ST-ZIP				
TITLE	VD	DELETE	3.1 TITLE			Change	☐ Addition
NAME	BARBER, JEFFREY		3.2 NAME				
STREET ADDRESS	456 GRIFFITH ST.		3.3 STREET ADDRESS				
CITY-ST-ZIP	PUNTA GORDA FL		3.4. CITY - ST - ZIP				
TITLE	Vo	DELETE	4.1 TITLE			☐ Change	Addition
NAME	LASSEY, VIRGINIA		4. 2 NAME				
STREET ADDRESS	29345 PINE VILLA CR		4.3 STREET ADDRESS				
CITY-ST-ZIP	PUNTA GORDA FL		4.4 CITY-ST-ZIP				
TITLE	P	DELETE	5.1 TITLE			Change	☐ Addition
NAME	WARRAM, BRUCE		5.2 NAME		-ahantar	Stood	
STREET ADDRESS	3624 ISLANDVIEW DR		5.3 STREET ADDRESS	1209 A	or ches ler	31166)	
CITY-ST-ZIP	PUNTA GORDA FL		5.4 CITY-ST-ZIP	1502 Or Port Char	10the, 17	33450	
TITLE		DELETE	6.1 TITLE	1.2.7.7.7.7		☐ Change	Addition
NAME			6.2 NAME				

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 er on an attachment with an address

6.3 STREET ADDRESS

Brico Warra Provident 4-2198