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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

K61261

(9)

SURPLUS WHOLESALE BROKERS, INC.

Principal Place of Business Mailing Address								
C/O DEWEY P. EASLEY 112 F. TEVER STREET 113 F. TEVER STREET								
112 E. TEVER STREET PLANT CITY FL 33566-2418				112 E. TEVER STREET PLANT CITY FL 33566-2418				DO NOT WRITE IN THIS SPACE
PEANT OFF PE S5500-2410				LANT CITT FL 30300-24	10			3. Date Incorporated or Qualified
								01/26/1989
2. Principal Place of Business			2a. Mailing Address					4. FEI Number Applied For
21			26					59-2936855 Not Applicable
Suite, Apt. #, etc			Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional
22			27					5. Certificate of Status Desired Fee Required
City & State			City & State					6. Election Campaign Financing \$5.00 May Be
23			28					Trust Fund Contribution
Zip		Country	\vdash	Zip	Cou	ntry		8. This corporation owes or has paid the current year Intangible
24 25		29				Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent						81 Name		10. Name and Address of New Registered Agent
	sley, Dewi					Naitie		
112 E. TEVER STREET				82		82 Street	Addres	ss (P.O. Box Number is Not Acceptable)
PLA	ANT CITY F	L 33566			-	83		
						84 City		FL 85 Zip Code
11. Pursuant I	to the provisi	ons of Sections 607.050	2 and 6	07.1508, Florida Statul	es, the at	ove-named	corpo	ration submits this statement for the purpose of changing its registered in's board of directors. I hereby accept the appointment as registered
office of re	egistered agi m familiar wit	ent, or both, in the State h, and accept the oblig	ations à	da. Such change was f, Section 607.0505, Fl	autnonzed orida Stati	i by the cor ites.	poratio	in s board of directors, I flereby accept the appointment as registered
SIGNATURE DONALD M. EASIEV								1-12-98
SIGNATORE	Signature, typed	or printed name of registered age	ent and title	if applicable. (NO)	E. Registered	Agent signatur	e required	when reinstating) DATE
12.		OFFICERS AN	D DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	n -			DELETÉ	1.1 70	I C		
,,,,,,	D			المالية المالية	1			Change Addition
NAME	EASLEY,	DEWEY P.		المالات المالات	1.2 NA			L Change L Addition
1	EASLEY, 4621 VA	LLEY VIEW DR. E		ين المستداد	- 1			L Change L Addition
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NAME STREET ADDRESS	EASLEY, 4621 VA LAKELAI ST	lley view dr. e ND FL	<i></i>	☐ DELETE	1.3 ST	ME REET ADDRESS Y-ST-ZIP		☐ Change ☐ Addition
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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 chapted, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Jonald M. Gasley OUIRED

1-12-98 (813)754-9450

FILED

Jan 23 1998 8:00am

Secretary of State

CR2E034 (10/97)