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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L15614

(5)

PARTY GOODS WAREHOUSE WEST INC.

Principal Place of Business Mailing Address C/O ROBERT SMITH C/O ROBERT SMITH 4170 N. FEDERAL HWY. 4170 N. FEDERAL HWY. POMPANO BEACH FL 33064 POMPANO BEACH FL 33064-6047 3. Date Incorporated or Qualified 3a. Date of Last Report 09/08/1989 04/12/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0152505 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMITH, ROBERT 4170 N. FEDERAL HIGHWAY Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33064 83 Zip Code 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgratus - typad or posted had eight expetend agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ■ DELETE THE 1.1 TITLE Change Addition SMITH, HAROLD NAME 1.2 NAME 800 E. JEFFREY ST. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** 011Y-S1-ZP 1.4 CITY-ST-ZIP DP ☐ Change DELETE Addition TITLE 21 TITLE SMITH. ROBERT NAME 22 NAME 4170 N FED HWY STREET ADDRESS 2.3 STREET ADDRESS POMPANO BCH FL CITY-ST-7P 2 4 CITY-ST-ZIP DELETE I-HE Change Addition 3.1 TITLE SUDDETH, B. F. MAME 3.2 NAME 1026 GORE DRIVE STREET ADDRESS 3.3 STREET ADDRESS OVIEDO FL DITY-ST-7-P 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE DON GIORDANO NAME 4. 2 NAME 6425 NW 52ND CT. STREET ADDRESS 4.3 STREET ADDRESS LAUDERHILL FL CHY-ST-ZP 44 CITY-ST-ZIP DELETE Change Addition THE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. If 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY-ST-ZIP

63 STREET ADDRESS 64 City-St-ZiP

61 TITLE

62 NAME

SIGNATURE:

CHTY-ST-7-P

STREET ADDRESS

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

21/27 954 943 534

Change

Addition

FILED

Feb 28 1997 8:00am

Secretary of State