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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

L40928

(8)

DOCUMENT #
1. Corporation Name

PARK TACK & SUPPLY, INC.

| | | | | | | | JF 4611 DIQUE DI | DAN ON BIN BIN | |
|---|---|--|------------------------|--|--|---|------------------|-----------------------------|-------------------------------------|
| Principal Place | | | ing Address | | | | | | |
| 1450 SW 3 POMPANO | BRD ST Beach Fl 33069 | 1450 SW 3RD ST POMPANO BEACH FL 33069 | | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 01/03/1990 | 3a. Date | of Last Re 14/24/19 | |
| 2. Principal Pla | ace of Business | 2a. I | Mailing Address | | | 4. FEI Number | | | Applied For |
| 1 | | 26 | | | | 65-0164027 | | | Not Applicable |
| Suite, Apt. | #, etc. | 1 1 | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | • | Additional Required |
| City & State | 0 | 27 | City & State | | | Election Campaign Financing | · | | May Be |
| 3 | | 28 | on, a onno | | | Trust Fund Contribution | | | d to Fees |
| Zip | Country | | 7.p | Cou | intry | 8. This corporation has liability for in | ntangible ta | under s | 199.032, |
| 4 | 25 | 29 | | 30 | | Florida Statutes Yes | | | |
| | 9. Name and Address of Curre | nt Registe | ered Agent | | | 10. Name and Address of New Re | gistered / | gent | |
| | | | | | 81 Name | | | | |
| | NSKI, ANTHONY J. | | | | 82 Street Addr | ress (P.O. Box Number is Not Acceptable | o) | | |
| | SW 3RD ST | | | | 83 | | | | |
| PUMP | ANO BEACH FL 33069 | | | | 03 | | | | |
| | | | | | 84 City | | FL | 85 Z | o Code |
| SIGNATURE | | | | | | | | | |
| | Signature typed or printed names of registromials: | ,, -, | | | l Agent signature require | | DATE | DIRECTO | DR\$ IN 12 |
| 12. | Signature, speed of or red name of registerorials in OFFICERS At | ,, -, | | NOTE Responses. 13. | | en while renstating ADDITIONS/CHANGES TO OFFIC | CERS AND | DIRECTO | |
| 12. Title | OFFICERS AN | ,, -, | IORS | 13. | I ^r LF | | CERS AND | | |
| 12. Title Name | D KARPINSKI, ANTHONY J 1450 SW 3RD ST | ,, -, | IORS | 13. 1 : 1 12 N | I ^r LF | | CERS AND | | |
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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 this corporation or the receiver or trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13-th changed, or by an attachment with an address.

SIGNATURE: Anthony Margaria Ded on PHINTED NAME OF SIGNING OFFICER OR DIRECTOR OF KOMPANY 3/1/46

Daytime Phone #