FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DOCUMENT # **L91208** **(3)**

1. Corporate Name

MAINTENANCE DEPOT, INC.

APPROVED AND FILED
95 MAY ... 9:37
SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1295 S.W. 4TH AVENUE DELRAY BEACH FL 33444 US	1295 S.W. 4TH AVENUE DELRAY BEACH FL 33444 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/06/1990**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **65-0329380** — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.03, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SEID, PHILIP
1295 SW 4TH AVENUE
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	VP
NAME	PHILIP SEID
STREET ADDRESS	5472 NW 77TH TERRACE
CITY-ST-ZIP	CORAL SPRINGS FL
TITLE	P
NAME	MERCER, WILLIAM J.
STREET ADDRESS	1295 SW 4TH AVENUE
CITY-ST-ZIP	DELRAY BEACH FL
TITLE	V.P
NAME	JED GOLINSKY
STREET ADDRESS	2657 NORTH OCEAN BLVD
CITY-ST-ZIP	BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	Change	Addition
1 (Title, Name, Street Address, City-St-Zip)	☐	☐
2	☐	☐
3	☐	☒
4	☐	☐
5	☐	☐
6	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: [signature] Vice President 5/1/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0087428 CP