

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L92886

1. Corporation Name

A. V. SALES CORPORATION

4-16-96 B-3701-C  
(5)



Principal Place of Business  
3703 131ST AVE NORTH  
CLEARWATER FL 34622

Mailing Address  
3703 131ST AVE NORTH  
CLEARWATER FL 34622

3. Date Incorporated or Qualified 07/27/1990  
3a. Date of Last Report 05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VINCENT, ROBERT L  
3703 131ST AVE NORTH  
CLEARWATER FL 34622

81 Name ALICE MARIE VINCENT

82 Street Address (P.O. Box Number is Not Acceptable)

83 3706 131ST AVE N.

84 City CLEARWATER

FL

85 Zip Code 34622

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

ROBERT L VINCENT

Signature typed or printed name of registered agent and the filer.

SIGNATURE

ALICE MARIE VINCENT

4/11/96

Signature typed or printed name of registered agent and the filer.

12. OFFICERS AND DIRECTORS

TITLE P  
NAME ALICE MARIE VINCENT  
STREET ADDRESS 3703 131ST AVENUE, N.  
CITY-ST-ZIP CLEARWATER FL

TITLE VP  
NAME ROBERT L. VINCENT  
STREET ADDRESS 3703 131ST AVENUE, N.  
CITY-ST-ZIP CLEARWATER FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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)(k), 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, or on an attachment with an address.

SIGNATURE:

ALICE VINCENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alice Vincent

4/11/96

813-573-5377

Daytime Phone #

CR2E034 (12/95)