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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M86166

BUYER'S CLUB, INC.

Principal Place of Business	Mailing /
22 PARK STREET S	22 PARK
ST PETE FL 33707	ST PETE

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90049 018 ***150.00



		_						
Principal Place	of Business	Mailing Address				(legiperi is in the state of t		
22 PARK STREET S ST PETE FL 33707 22 PARK STREET S ST PETE FL 33707			,	DO NOT WRITE IN THIS SPACE				
US		US			l	3. Date Incorporated or Qualifed		
						06/15/1988		
6 District Dis	as of Punings	2a. Mailing Address				4. FEI Number	Appl	lied For
2. Principal Pla	ace of business	26			_	59-2932561	Not	Applicable
Suite, Apt. #	t etc	Suite, Apt. #, etc.					\$8.75 Ad	I
	r, etc.	27				5. Certificate of Status Desired	Fee Req	uired
City & State		City & State	-			6. Election Campaign Financing	\$5.00 M	, ,
23	•	28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country			8. This corporation owes the current year Intang	jible 1. r	٦
24	25	29 30	<u>. </u>			Personal Property Tax:		□No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Ag	ant	
			81	Name	10	ina Karen L.		
	3, KAREN L		82	Street /	Addre	ess (P.O. Box Number is Not Acceptable)	_	
8737	BARDMOOR PLACE			147	<u>150</u>	o Banana Tree Lan		
#202			83			•		ĺ
LARG	GO FL 33777		84	City			85 Zip C	ode
			ļ	1 1 3.	ear	rwater FL	<u> </u>	760
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the abov	e-named	corpo	ration submits this statement for the purpose of chin's board of directors. I hereby accept the appointment	anging its i ient as reg	istered
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	tiens of, Section 607.0505, Florida	a Statutes	3)		69		
	Haven &	sana KAR	4N 1	ι . ι	<u>A N</u>	1G 1-30-99		h
SIGNATURE	Signature, yped or printed name of registered age			nt signature r	equired	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
12.		ID DIRECTORS	13.		T•	ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
TITLE	PST	☐ DELETE	1.1 TITLE				_	_ }
NAME	LANG, KAREN L	_	1.2 NAME		11-1-	120 Banana Tree Lane	,	
STREET ADDRESS	8737 BARDMOOR PLACE #20	2				earwater, FL 33760		
CITY-ST-ZIP	LARGO FL 33777	DELETE	1.4 CITY-5	ST-ZIP			Change	Addition
TITLE		L_J DELETE	2.1 TITLE		1	•		1
NAME			2.2 NAME	T 4000555	1	_ .		
_STREET ADDRESS	<u> </u>	- 4	1		· ·	The second secon		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	ــــــ			
TITLE		☐ DELETE	3.1 TITLE			, ι	Change	☐ Addition
NAME			3.2 NAME					}
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	₩			Time addition
TITLE		☐ DELETE	4.1 TITLE			l	Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP		C) actors	4.4 CITY-	ST-ZIP	₩		7 Change	Addition
TITLE		☐ DELETE	5.1 TITLE			L	Change	Addition
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS	1			
CITY-ST-ZIP		□ oc. c	5.4 CITY-5		₩		Channe	
TITLE		☐ DELETE	6.1 TITLE			L	Change	Addition (
NAME			6.2 NAME			•		J
STREET ADDRESS	İ		■ 6.3 STREE	ET ADDRESS	1			1

6.4 CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: