FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 5:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P92000006761 (0)

1. Corporation Name
PHIL-MOR SUPPLY INC.

Principal Place of Business
6260 TERRA ROSA CIR
BOYNTON BCH FL 33437
US

Mailing Address
6260 TERRA ROSA CIR
BOYNTON BCH FL 33437
US

3. Date Incorporated or Qualified: 11/20/1992
3a. Date of Last Report: 03/18/1994
4. FEI Number: 65-0377131 — 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. 199.032, Florida Statutes ☒ Yes ☐ No

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

9. Name and Address of Current Registered Agent
O'REILLY, SHARON A
6260 TERRA ROSA CIR
BOYNTON BCH FL 33437

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 9043 Chrysanthenum Drive
83
84 City: Boynton Beach — FL — 85 Zip Code: 33437

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	DPT
NAME	O'REILLY, SHARON A
STREET ADDRESS	6260 TERRA ROSA CIR
CITY-ST-ZIP	BOYNTON BCH FL
TITLE	DVS
NAME	COLLIE, DONNA M
STREET ADDRESS	6260 TERRA ROSA CIRCLE
CITY-ST-ZIP	BOYNTON BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP, T	☒ Change ☐ Addition
NAME		
STREET ADDRESS	9043 Chrysanthenum Drive	
CITY-ST-ZIP	Boynton Beach, Fl 33437	
TITLE	P, S	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	Boynton Beach Fl 33437	

14. I the undersigned, 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 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: Sharon A O'Reilly — Sharon A O'Reilly, Vice President — 4/29/95 — 305 628-1890

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

0264391 CP