5-2-97 B-6150 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000011686 (1)

THE ISLAND EMPORIUM, INC.

Principal Place of Business

160 PINE STREET EAST St. George Island FL 32328 US				HCR BOX 94 ST. GEORGE ISLAND FL 32328 US										
									 Date Incorporated or Qualif 02/08/1993 	ied	3a. Date of Last Report 04/24/1996			
2. Principal Place of Business				2a. Mailing Address				}	4. FEI Number			Ar	oplied For	_]
21		26						59-3174110	_,			ot Applicable	3	
Suite Apt.# etc. 22			27	<u> </u>				5. Certificate of Status Desired	3 [\$8.75 Additional Fee Regulred				
City & State	City & State			City & State					Election Campaign Financia Trust Fund Contribution	ng [\$5.00 May Be Added to Fees			
Zip	[Country	Z	Zip Coun					8. This corporation has liability for intangible tax under s. 199.032,				199.032,	7
24	25			29 30			·		Florida Statutes Yes No					
9. Name and Address of Current F								10. Name and Address of New Registered Agent						
LON	BOM, PAUL W					81	Name		IORT , WILLI.	a m		7.		1
H.C.	R. BOX 21					82	Street		(P.O. Box Number is Not Acce			<u> </u>		\dashv
ST. GEORGE ISLAND FL 32328				July Street A				160 PINE AVE EAST						
						83								٦
						84	City					85 Zip	Codo	-4
						"	50	6	CORGA ISLAN	0	FL	94		1
11, Pursuant l	to the provisions	of Sections 607.0502	and 607.	1508, Florida Statu	tes, the	e above	-named	d corpora	ation submits this statement for	the our	pose of	changing it	s registered	T]
office or re agent Lai	egistered agent (m familiar with, a)	or both, in the State on both and the contractions of the contract	of Florida. idens of S	Such change was Section 607 0505. Fi	author Iorida S	ized by Statutes	the corp	rporation	's board of directors. I hereby a	accept t	he appo	ointment as	registered	1
	, (1)	·V/ \	7 5	Vint	ionau i	J. 0.0.0.0				4	28-	9-7		- [
SIGNATURE /		ted name of registered agent	and title if a	pplicable (NO	TE: Regis	lered Age	nt signature	re required y	then reinstating)	7-	DATE	<u> </u>		-
12.		OFFICERS AND	DIRECTO	ORS	1	3.			ADDITIONS/CHANGES TO C	FFICE	RS AND	DIRECTOR	IS IN 12	79
TITLE	VP			DELETE	1	.1 TITLE						Change	Addition	ڔٙٳڮٞ
NAME	SHORT, MAR	Y LOU			,	.2 NAME		ĺ						13
STREET ADDRESS	H.C.R. BOX 1				1	3 STREET	ADDRESS	1						١٤
City-\$1-Zin	ST. GEORGE				1	.4 CITY+S	T-ZIP							
TiTLE	P			DELETE		1 TITLE		1	······································			Change	Addition	ন্
NAME {	SHORT, WILL	IAM M			2	2 NAME	!							1
STREET ADDRESS	H.C.R. BOX 1				2.	.3 STREET	ADORESS	1						
CITY - ST - ZIP	ST. GEORGE				1	4 CITY - S		1						-
TITLE				DELETE		1 TITLE		1	······································			Change	Addition	<u>. </u>
NAME	1				3	S NAME		ĺ						1
STREET ADDRESS					3	3 STREET	ADDRESS	1						1
CITY+ST-ZIP						4. CITY-S	1							ļ
TITLE				DELETE		1 TITLE		1				Change	☐ Addition	$\vec{1}$
NAME					4	2 NAME		[•		1
STREET ADDRESS						.3 STREET	ADDRESS	ł						1
CITY SI-ZIP					4	4 City-S	T-ZIP							
11TLE				DELETE		.1 TITLE			······································	\	***************************************	Change	Addition	ĩ[
NAME (5	.2 NAME	,							1
STREET ADDRESS						3 STREET	ADDRESS	1						1
CITY-SI-7F						4 CITY - S		1						
THUE				DELETE		1 TITLE		1	······································			Change	Addition	1
NAME					6	2 NAME		1				Í		
STREET ADDRESS						.9 STREET	ADDRESS	1						ł
CHY+ST-ZIP						4 CITY-S		-						1
14. I do hereb	by certify that the	information supplied	with this	filing does not qual	lify for I	he exe	mption s	stated in	Section 119.07(3)(i), Florida St	atutes.	l further	certify that	the	-
Lam an of	fficer or director of	is armual report or su of the corporation or t	he receiv	er or trustee empoy	wered t	nd accu to exec	rate and ute this r	d that my report a	y signature shall have the same s required by Chapter 607, Flor	legal e ida Sta	iffect as tutes; ar	if made un nd that my r	der oath; tha name	at