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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 12:47

DOCUMENT # P93000012250 (5)

1. Corporation Name
STOCKIN' IT, INC.

Principal Place of Business	Mailing Address
20774 EAGLE CREEK CT BOCA RATON FL 33498	9689 MAJESTIC WAY BOYNTON BCH FL 33437 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/12/1993	3a. Date of Last Report: 04/20/1994
4. FEI Number: 65-0388610	☐ 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	2a. Mailing Address
21 9689 Majestic Way	26
22 Boynton Bch #	27
23 FL	28
24 Zip 33437	29 Zip
25 Country USA	30 Country

9. Name and Address of Current Registered Agent

COLEBANK, PATTY
20774 EAGLE CREEK CT
BOCA RATON FL 33498

10. Name and Address of New Registered Agent

81 Name: Linda Gius
82 Street Address (P.O. Box Number is Not Acceptable): 9689 Majestic Way
83: Boynton Beach FL 33437
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: Linda A Gius — 4/27/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	D	☑ Change ☐ Addition
NAME	COLEBANK, PATTY	12 NAME	Joni Bond	
STREET ADDRESS	20774 EAGLE CREEK CT	13 STREET ADDRESS	4004 NW 24th Terr	
CITY-ST-ZIP	BOCA RATON FL 33498	14 CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE	D	21 TITLE	D	☑ Change ☐ Addition
NAME	SHEPPARD, CAROL	22 NAME	Beverly Mize	
STREET ADDRESS	10748 ST. ANDREWS ROAD	23 STREET ADDRESS	3941 Tucks Road	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	24 CITY-ST-ZIP	Boynton Bch FL 33424	
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	CALDWELL, KATHY	32 NAME		
STREET ADDRESS	1320 SW 26TH AVENUE	33 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33426	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	GIUS, LINDA	42 NAME		
STREET ADDRESS	9689 MAJESTIC WAY	43 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33437	44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME	RESIGNED	
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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: Linda A Gius — 4/27/95 — 305 429-2208
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0264660 CP