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CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 PM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000025041 (3)**

1. Corporate Name

TREASURES STORES INCORPORATED

Principal Place of Business
7200 US 19 NORTH
STE 522
PINELLAS PARK FL 34665
US

Mailing Address
5161 TANGLEWOOD PKWY
FT MYERS FL 33919

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/01/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 7200 US 19 NORTH
Suite, Apt. #, etc.
27 STE 522
City & State
28 Pinellas Park FL
Zip 29 34665 Country 30 US

4. FEI Number: 65-0424088 — 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

9. Name and Address of Current Registered Agent

POSNER, ARTHUR
5161 TANGLEWOOD PKWY
FT MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name: POSNER, Arthur
82 Street Address (P.O. Box Number is Not Acceptable): 7200 US 19 NORTH
83 SUITE # 522
84 City: Pinellas Park FL 85 Zip Code: 34665

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: Arthur Posner — Arthur Posner Board Chair — 4/27/95
Signature of Typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required after name/title — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	P/D/C	☒ Change ☐ Addition
NAME	WALLACE, WILLIAM	12 NAME	Arthur Posner	
STREET ADDRESS	1967 CORMORANT CT., #514	13 STREET ADDRESS	7200 US 19 North #522	
CITY ST ZIP	CLEARWATER FL	14 CITY ST ZIP	Pinellas Park FL 34665	
TITLE	VP	21 TITLE		☐ Change ☐ Addition
NAME	POSNER, BONNIE	22 NAME		
STREET ADDRESS	5161 TANGLEWOOD PKWY	23 STREET ADDRESS		
CITY ST ZIP	FT. MYERS FL	24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		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		
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. 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: Arthur Posner — 4/27/95 — 813-526-2152
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0123091 CP