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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT #

P93000051087 (3)

AMERICAN DUTY FREE SUPPLY COMPANY, INC.													
Principal Place of Business Mailing Address								\dashv	T OCCULED I SUD KOTOO TIKSU OOTII BOIST OL	HAT 44 111 4 11	OF LIGHT ORIGIN	JEH I je i i je i	
2841 N.W. 107TH AVE. 2841 N.W. 107TH AVE.													
MIAMI FL 33172 MIAMI FL 33172									DO NOT WRITE IN THIS SPACE				
US US									3. Date Incorporated or Qualified				
									07/21/1993				
2. Principal Place of Business 2a. Mailing Address								+	4. FEI Number		A	polied For	
21			26	26					65-0512547		N	ot Applicable	
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
22			27					_				equired	
City & State	3. State					6. Election Campaign Financing			May Be				
23		0	28						Trust Fund Contribution	<u> </u>		to Fees	
Zip		Country		├			Journay		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24 25 29 3						10. Name and Address of New Reg							
							Name						
MASSEY, GARY E 112 WEST CITRUS ST.						On Chron Add			(P.O. Box Number is Not Acceptate	ale)			
ALTAMONTE SPRINGS FL						82 Street Addr			(F.O. BOX NUMBER IS NOT Acceptate	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
'-		0,111,100				83							
						84	City		 		85 Zip	Code	
										FL	_ 1 1 ′		
11. Pursuant t office or re agent. I ar	ions of Sections 607.0 gent, or both, in the St ith, and accept the ob	0502 and 607.150 ate of Florida. Subligations of, Sect	08, Florida Statul ch change was ion 607.0505, Fl	es, the a authorize orida Sta	bove d by tutes	e-named con the corpora s.	orpora ration'	tion submits this statement for the particles of directors. I hereby accepted the submit of the statement for the particles of the submit of t	ourpose o pt the app	f changing pointment as	its registered s registered		
SIGNATURE											-	· .	
Signature, typed or printed name of registered agent and little if applicable. (NOTE							nt signature req	quired w	then reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CEDS AND	DIRECTO	DC IN 12	
12.	DPS	OFFICERS	DELETE	13. 1.1 TITLE				ADDITIONS/CHANGES TO OFFIC	JENS AN	Change	Addition		
NAME	_	OMASSIW K		beerie	1.2 N							_ '	
''' '	NAME AMONDI, WISSAMO STREET ADDRESS 2841 N.W. 107TH AVE.						ADDRESS						
	DITY-ST-ZIP MIAMI FL						1.4 CITY-ST-ZIP					1	
TITLE	1419 11711			☐ DELE te		2.1 TITLE					Change	Addition	
NAME				221		22 NAME							
STREET ADDRESS					2.3 \$	TREET	ADDRESS						
CITY-ST-ZIP					2.40	CITY-S	ST-ZIP						
TITLE				DELETE	3.1 T	ITLE					Change	☐ Addition	
NAME					3.2 N	AME						1	
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP				1 25/555	_	_	ST-ZIP				Change	Addition	
TITLE				DELETE	4.1 T						L. Change	Addition	
NAME						NAME							
STREET ADDRESS							ADDRESS					ŀ	
CITY-ST-ZIP				DELETE	4.4 C 5.1 T	ITY-S	1 - ZIP				Change	☐ Addition	
TITLE					5.1 N								
NAME CTREET ADDRESS							ADDRESS						
STREET ADDRESS						incei ITY+S			•				
CITY-ST-ZIP TITLE				☐ DELETE	6.1 7						☐ Change	Addition	
NAME					6.2 N								
A							ADDOCCO						

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 suppliemental 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 trest elemporated 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.

010114THBF

3-12-98 (205)392500

FILED

Mar 26 1998 8:00am

Secretary of State

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