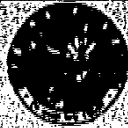


PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Dorinda B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 17 AM 9:28

DOCUMENT # P93000068868 (7)

1. Corporation Name

GOOD GUYS OF BREVARD, INC.

Principal Place of Business

Mailing Address

243 PROVINCIAL DR
INDIALANTIC FL 32903

243 PROVINCIAL DR
INDIALANTIC FL 32903

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

09/27/1993

04/29/1994

4. FEI Number

Applied For

59-3207233

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 *Good Guys of Brevard, Inc.*

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 *1308 N. HARBOR CITY BLVD.*

27

City & State

City & State

23 *MELBOURNE, FLORIDA*

28

Zip

Country

Zip

Country

24 *32935*

25 *BREVARD*

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHNITZER, RAYMOND L
243 PROVINCIAL DR
INDIALANTIC FL 32903

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 607.0509, Florida Statutes.

SIGNATURE

Raymond L. Schnitzer
Signature (typed or printed name of registered agent and title if applicable)

RAYMOND L. SCHNITZER
NOTE: Registered Agent signature required when recasting

DATE

6-6-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	SCHNITZER, RAYMOND L
STREET ADDRESS	243 PROVINCIAL DR
CITY - ST - ZIP	INDIALANTIC FL 32903
TITLE	D
NAME	WILANSKY, JOHN R
STREET ADDRESS	2700 N A1A BLDG 1-103
CITY - ST - ZIP	INDIALANTIC FL 32903
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☒ Change ☐ Addition
22 NAME	WILANSKY, JOHN R.
23 STREET ADDRESS	1006 WASHLEY AVE.
24 CITY - ST - ZIP	INDIAN HARBOR BEACH FL. 33937
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
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)(b), 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; that I am 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 addition sheet with an address.

SIGNATURE:

John R. Wilansky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John R. Wilansky

6/6/95

(407) 242-9896

CR2034 (3/95)