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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000077750 (6)

MR. JERRY'S DISCOUNT CENTER, INC.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 325 WEST AVENUE A 325 WEST AVENUE A BELLE GLADE FL 33430 BELLE GLADE FL 33430 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/05/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0451466 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent HURST, CARL 325 WEST AVENUE A Street Address (P.O. Box Number is Not Acceptable) **BELLE GLADE FL 33430** 83 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 Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE **HURST, CARL** 1.2 NAME NAME 325 WEST AVENUE A STREET ADDRESS 1.3 STREET ADDRESS **BELLE GLADE FL 33430** 1.4 CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition 2.1 TITLE TITLE HURST, JEAN 2.2 NAME NAME 325 WEST AVENUE A STREET ADDRESS 2.3 STREET ADORESS **BELLE GLADE FL 33430** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3.1 TITLE Change 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 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.

6.4 CITY-ST-ZIP

HURST 1/15/90 561996-6813 CR2E034 (10/97