

MAY 2 1998 1:03AM HYUNDAI

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

FILED
May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000001223 (4)

1. Corporation Name
MERCHSUPPLY, INC.

Principal Place of Business

5801 WEST 2ND COURT
HALEAH FL 33012

Mailing Address

5801 WEST 2ND COURT
HALEAH FL 33012-3510

3. Date Incorporated or Qualified
01/08/1994

3a. Date of Last Report
04/02/1998

2. Principal Place of Business

21 7251 N.W. 54 ST

2a. Mailing Address

26 7251 N.W. 54 ST

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

City & State

23 MIAMI, FL

City & State

28 MIAMI, FL

24 33166

25 USA

29 33166

30 USA

5. Certificate of Status Desired

Applied For
Not Applicable

6. Election Campaign Financing
Trust Fund Contribution

\$8.75 Additional
Fee Required

8. This corporation has liability for intangible tax under s. 198.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARLOS M. VERDE
5801 WEST 2ND COURT
HALEAH, FL 33012

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 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE  CARLOS VERDE, PRESIDENT

4/30/98

Signature. Typed or printed name of registered agent and the II acceptable

NOTE: Registered Agent's signature required when terminating

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P VERDE, CARLOS M
5801 WEST 2ND COURT
HALEAH FL 33012

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
Change Addition

14. I do hereby certify that the information supplied with this filing 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 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  SIGNATURE  SIGNATURE 