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

DOCUMENT # P94000048013 (4)

ACTION AUCTION, INC.

1998

FILED Apr 07 1998 8:00am Secretary of State



Principal Plac	0 Of Business	N	Mailing Address				
190 W GLADES ROAD SUITE C			190 W GLADES ROAD SUITE C				
BOCA RATON FL 33432			BOCA RATON FL 33432				
]							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
			·				06/24/1994
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
21			26				65-0507466 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22			<u> </u>				Fee Required
City & State		ļ	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	→				Trust Fund Contribution Added to Fees
Z _I p	Z _I p Country		Zip Countr		ntry	•	8. This corporation owes or has paid the current year Intangible
24	25	29		30			Personal Property Tax due June 30. 🔀 Yes 🔲 No
	9. Name and Address of Current	Regi	stered Agent				10. Name and Address of New Registered Agent
LUI	PO, JACK				81	Name	
190 W GLADES ROAD SUITE C				-	82 Street Address (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33432			82 Street Ad			Street A	address (P.O. Box Number is Not Acceptable)
50	07.12,1011 1E 0010E			ł	83		
					84	City	85 Zip Code
44 D	10		007 4660 51 11 61			L	FL 63 2 P SSSC
office or r	to the provisions of Sections 607.0502 egistored agent, or both, in the State (rang u of Flori	607.1508, Fiorida Stati ida. Such change was	utes, the at authorized	oove 1 bv	e-named c	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions c	of, Section 607.0505, F	Iorida Stat	utes	3.	oralismo social of directors. This objection appointment as registered
SIGNATURE							
	Signature, typed or pointed name of registered agen			TE Hagistered	i Age	nt signature r	equired when reinstating) DATE.
12.	OFFICERS AND	DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			1.1 10	LE		Change Addition	
NAME	LUPO, JACK			1.2 NA	ME	j	
STREET ADDRESS	190 W. GLADES ROAD, SUITE	C		1.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY - ST - ZIP		T - 7IP		
TITLE	DVP DELETE				2.1 TITLE		Change Addition
NAME	LANDI, THERESA		22 NA	2.2 NAME			
STREET ADDRESS	190 W. GLADES ROAD, SUITE	C				ADDRESS	
CITY-ST-ZIP BOCA RATON FL 33432				2.3 STREET ADDRESS 2.4 City-St-Zip			
TITLE	DS		DELETE			51 - ZIP	Change D Addition
	T.T			3.1 TiT			☐ Change ☐ Addition
NAME	HUMPHREYS, PATRICIA A	_		3.2 NA			
STREET ADDRESS	190 W. GLADES ROAD, SUITE	U		3.3 ST	REET.	ADDRESS	
CITY-ST-ZIP				3.4. CI		ST-ZIP	
TITLE			☐ DELETE	4.1 311	ŧΕ		Change Addition
NAME				4.2 N	ME		
STREET ADDRESS				4.3 STI	REET.	ADDRESS	
CITY-ST-ZIP				4.4 CI1	[Y-S]	T- ZIP	
TITLE			DELETE	5.1 TIT			☐ Change ☐ Addition
NAME				5.2 NA	ME		— · -
STREET ADDRESS						ADORESS	
CITY-ST-ZIP TITLE			DELETE	5.4 CIT		I-ZIP	C Ohanne C Addition
			ב) טנננונ	6.1 TIT		i	. Change Addition
NAME				6.2 NA			
STREET ADDRESS				63 ST	REET	ADDRESS	
CITY-ST-ZIP				6 4 CiT	Y- S1	T-ZIP	

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.

4/1/98

(561) 391-8244