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

<u>1998</u>

DOCUMENT # P94000088577 (9)

SECOND CHANCE WHOLESALE, INC.

FILED Mar 09 1998 8:00am Secretary of State



(812) (30-7752

							
Principal Place of Business Mailing Address							
5801 ULMERTON ROAD 5801 ULMERTON ROAD							
SUITE 203 SUITE 203 CLEARWATER FL 33760 CLEARWATER FL 33760			80	DO NOT WRITE IN THIS SPACE			
US US					3. Date Incorporated or Qualified		
					12/01/1994		
	Place of Business	2a. Mailing Address		0 .	4. FEI Number		Applied For
21 2801	Ulmerton K	-02d 26 5801 Uln	nerton	Road	59-3281069		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	7	75 Additional
22 Ste. # 203 27 Ste. # 20			<u> </u>		S. Continuate of States Boomes	Fe	e Required
City & State City & State			4	ا. ا	6. Election Campaign Financing		.00 May Be
	rwater, FL	28 Clearu		=L	Trust Fund Contribution		ded to Fees
Zip AAAA	Country	1105 29 337100	Country	1105	This corporation owes or has		ar Intangible
24 3311		パルら 29 <u>ろろりゅう</u> of Current Registered Agent	30 11 NE	nus	Personal Property Tax due Ji 10. Name and Address of New		
00			81	Name M	- (+ 0 1/ +	(
	OHRS, DENIS A	•	chael G. Kri	zmakie	L		
5801 ULMERTON ROAD 82 Street Address SUITE 203					ss (P.O. Box Number is Not Accer	治 #2/	ا ه
	EARWATER FL 33760		Cimerioc Id.,	STO I WOLL	, <u>, , , , , , , , , , , , , , , , , , </u>		
CL	EARWAIER FL 33/00		83				
,			84	City (10)	arwater	FL 85	Zip Code
44 Pureuant	to the provisions of Sections	607 0502 and 607 1508 Florida Sta	tutes the above-	~			ing its registered
office or r	egistered agent, or both, in	the State of Florida. Such change wa	s authorized by t	the corporation	n's board of directors. I hereby ac	cept the appointmen	nt as registered
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 effice 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 lamiliar with, and accept the obligations of Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed in printed name of re	distored agent and little it folicable (N	NO E Registered Agent	signature required	when reinstalling)	DATE DATE	70
12.		CERS AND DIRECTORS	13.	agriciore required	ADDITIONS/CHANGES TO OF	FICERS AND DIREC	TORS IN 12
TITLE	DPS	DELETE	1,1 TITLE		7.0011011070701111102011001	Cha	
NAME	KRIZMANICH, MICHAI	FI G	1,2 NAME	1			
STREET ADDRESS	5801 ULMERTON RD		1.3 STREET AL	DOBESS			
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-	· 1			
TITLE	VED ************************************	DELETE	2.1 TITLE			☐ Cha	nge
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET AC	DDBESS			
CITY-ST-ZIP			2. 4 CITY - ST-				
TITLE		DELETE	3,1 TITLE			☐ Čha	nge 🔲 Addition
NAME			3.2 NAME				l.
STREET ADDRESS			3.3 STREET AC	DORESS			
CITY-ST-ZIP			3.4. CITY+ST+	- ZIP			
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CITY-ST-ZIP			4.4 CITY - ST-				l
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NAME			5.2 NAME				
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CITY-ST-ZIP			5.4 CITY-ST-	j			
TITLE		DELETE	6.1 TITLE			Cha	nge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET AL	DDRESS			ŀ
CITY-ST-ZIP			6.4 CITY-ST-				İ
14. I hereby o	certify that the information su	pplied with this filing does not qualify	y for the exemption	on stated in Se	ection 119.07(3)(i), Florida Statute	s. I further certify tha	t the information
		plemental annual report is true and a r the receiver or trustee empowered t					
Block 12	or Block 13 if changed, or or	n an attachment with an address.		7			, · ·