

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000091616 (0)

1. Corporation Name

BURGIN'S HARDWARE, INC.

Principal Place of Business

**1550 WEST 84TH STREET
HIALEAH FL 33014**

Mailing Address

**1550 WEST 84TH STREET
HIALEAH FL 33014**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/16/1994

3a. Date of Last Report

4. FEI Number
65-0541936

Applied For
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

9. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 SAME

2a. Mailing Address

26 SAME

Suite, Apt. #, etc

Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WETZEL, WILLIAM G JR.
39 EAST 6TH STREET
HIALEAH FL 33010**

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 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **BURGIN, THOMAS L**
STREET ADDRESS **7013 CROWN GATE PLACE**
CITY, ST, ZIP **MIAMI LAKES FL 33014**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE **SD**
NAME **BURGIN, RICHARD A**
STREET ADDRESS **15601 CARRIAGE COURT**
CITY, ST, ZIP **DAVIE FL 33331**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE **TD**
NAME **TOUGH, NANCY C**
STREET ADDRESS **6497 WEST 13TH COURT**
CITY, ST, ZIP **HIALEAH FL 33012**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE **TD**
NAME **BURGIN, MARY M**
STREET ADDRESS **7013 CROWN GATE PLACE**
CITY, ST, ZIP **MIAMI LAKES FL 33014**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

☐ Change ☐ Addition

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 110 (073)(k), 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 my address.

SIGNATURE:

Nancy C. Tough

NANCY C. TOUGH

4-27-95

305-821-5387

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number