

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90012 037 ***150.00

DOCUMENT # P95000005688

1. Entity Name

VACUUM CENTER SUPER STORES, INC.



Principal Place of Business
807 CHOCTAW LANE
SHALIMAR FL 32579

Mailing Address
807 CHOCTAW LANE
SHALIMAR FL 32579

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3295996

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEICHMAN, ROBERT A SR
807 CHOCTAW LANE
SHALIMAR FL 32579

Name

N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME WEICHMAN, ROBERT A SR
STREET ADDRESS 807 CHOCTAW LANE
CITY-ST-ZIP SHALIMAR FL 32579-2248

TITLE ☐ Change ☐ Addition
NAME SAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME WEICHMAN, NORMA F
STREET ADDRESS 807 CHOCTAW LANE
CITY-ST-ZIP SHALIMAR FL 32579-2248

TITLE ☐ Change ☐ Addition
NAME SAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME WEICHMAN, ROBERT A JR
STREET ADDRESS 1005 FAY DR
CITY-ST-ZIP MARY ESTHER FL 32569

TITLE ☒ Change ☐ Addition
NAME 36054 - Unit 102 Emerald Coast Pkwy.
STREET ADDRESS Destin, FL 32541
CITY-ST-ZIP

TITLE V ☐ Delete
NAME WEICHMAN, DAVID M
STREET ADDRESS 3305 E LLOYD ST
CITY-ST-ZIP PENSACOLA FL 32503

TITLE ☒ Change ☐ Addition
NAME 3804 N. 9th Ave.
STREET ADDRESS Pensacola, FL 32503
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *NORMA F. WEICHMAN*
Norma F. Weichman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 28, 04

Date

850-651-4770
850-862-1222

Daytime Phone #