SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



LLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9500005769 (1)

TURTLE ROCK SALES, INC.

Principal Place of Business

Mailing Address

97 OCT -9 PH 2: NO

9/12/82



2801 NORTH PENINSULA AVENUE NEW SMYRNA BEACH FL 32169		2801 NORTH PENINSULA AVENUE NEW SMYRNA BEACH FL 32169		DO NOT WRIT	E IN THIS SPACE
• Date of the last	New and Construction	1 2 m 2 m 2 m m 		Date Incorporated or Qualified 01/23/1995	3a, Date of Last Report 04/25/1996
2. Principal P 21 2801	No Peninsola Ave	2a. Mailing Address		4, FEI Number 22-3338981	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	912	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Q	Crty & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 32 1	Country 25	7ip [29]	Country 30	This corporation owes or has p Personal Property Tax due Jun	e 30. 🔲 Yes 🔲 No
RF	Name and Address of Current RNBAUM, PETER	Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
	OI NORTH PENINSULA AVENUE			trace (D.C. Double subset in Not Assessed	LI-3
NEW SMYRNA BEACH FL 32189				Address (P.O. Box Number is Not Acceptable)	
			83		
			84 Lity		85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Horida State	ites, the above-named corr	poration submits this elatement for the	Purpose of changing its registered
office or r	egistered agont, or both tin the State c m familiar with, and accept the oblight	of Horida, Such change was	authorized by the corpora	poration submits this statement for the dust is board of directors. Thereby acce	pt the appointment as registered
SIGNATURE	» о жолист у лы, аналассера инс овяцан	тоно он, околон польооо, г	A CA	2/2	lin
	Signature, typosi or printed name of registered agent		Ficgistored Agert signature requ	red when reinstaling)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	·
TITLE	Bernbaum, Peter	☐ DECE Y	1.1 THE		Change Addition
NAME STREET ADDRESS	2801 N PENINSULA AVE		1.2 NAME		
CITY-ST-ZIP	NEW SMYRNA BEACH FL		1.3 STREET ADDRESS	9000023	32 11 890
TITLE		DITTE	1.4 CHY+\$1+2IP 2.1 TOLE		/97 - 0#090 - 0#3
NAM E			2.2 NAME	****55	0.00 *****550.00°°
STREET ADDRESS			2.3 STREET ADDRESS		
CITY ST-ZIP			2 4 CHY-S1-7IP		
101E		☐ DELETE	31 1/ILE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DECETE	3.4. CHY - S1 - Z/F		
NAME		FT perru	4.1 THLE 4.2 NAME		Change Addition
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.3 STREET ADJRESS 4.4 CITY- \$1-7IP		
TITLE		DELETE	51 TITUE		Change Addition
NAME			5.2 NAME		^^
STREET ADDRESS			5.3 STREET ADDRESS		UQ_{α} $\alpha \cap A$
CITY-ST-ZIP			5.4 CHY+S1-ZIP		10-10-11
TOTLE		☐ DELFTE	6111111		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STHEET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		
information Lam an of	by centry that the information supplied in indicated on this annual report or su- ficer or director of the corporation or the in Block 12 or Block 13 if changed, or in	optou cutal annual report is re receiver or trustee empor	true and accurate and that vered to execute this report	I in Section 119.07(3)(i), Florida Statute tripy signature shall have the same legant rI as required by Chapter 607, Florida (is. I turther certify that the al effect as if made under eath; that Statutes, and that my name