## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000018279

**CONSIGNMENT PAVILION, INC.** 

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**FILED** Apr 22 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address				t iteliath sid raid: distr adste tein dern darm sradt tant mair emir imm.
2113 S. U.S. HIGHWAY ONE JUPITER FL 33477			2113 S. U.S. HIGHWAY ONE JUPITER FL 33477				
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							03/07/1995
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
21			26				65-0559475 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22			27				Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23			28				Trust Fund Contribution
Zip Country			Zip Country			1	8. This corporation owes or has paid the current year Intangible
24	25 25 Name and Addr	and of Courses	29	30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
		ess or current	registered Agent		81	Name	10, Maille and Address of New Acgistered Agent
	SS, DONALD L				Ľ.	140/110	
7168 SE OSPREY ST.						Street A	Address (P.O. Box Number is Not Acceptable)
- HOE	BE SOUND FL 3345	55			83	ļ	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
					"		
					84	City	FL 85 Zip Code
dd Discount t	a the area in one of Co.	otions COZ OLOO	and 607 1500. Elevido Clari	utoe the e	h 014	e samad a	corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or bot	th, in the State of	i Florida. Such change was	s authorize	d by	y the corpo	corporation's board of directors. I hereby accept the appointment as registered
agent. I ar	n familiar with, and ac	cept the obligati	ons of, Section 607.0505, F	Florida Stat	tute	S.	
SIGNATURE	Signature, typed or printed nar		All	OIE Booktore	d Ag	and e-gradure of	required when reinstating) DATE
12.		OFFICERS AND		13.	u Age	erii signature: re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	0,110,107,107	☐ DELETE	111	TLE	T	☐ Change ☐ Addition
NAME	MICHALAROS, ANTHONY			12 NAME		ŀ	<del></del> • <del></del>
STREET ADDRESS 6391-1 RIVERWALK LANE				1.3 STREET A		LADDRESS	
CITY-ST-ZIP	JUPITER FL 3345					ST - ZiP	
TITLE	901112111200100		DELETE 2.11			- I	Change Addition
NAME				2.2 N	AME	1	
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CITY-ST-ZIP						ST-ZIP	
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CITY-ST-ZIP	•					ST-ZIP	
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STREET ADDRESS				4.3 S	TREET	ADDRESS	
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NAME				5.2 N	AME		000000400160
STREET ADDRESS				5.3 S	TREET	T ADORESS	800002498168 -04/23/9801076011
CITY+ST-ZIP						ST-ZIP	***150.00   Change   Addition
TITLE	<del></del>		DELETE	6.1 T			Change Addition
NAME				6.2 N	AME		<b>N</b> . ~
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CITY-ST-ZIP	*	1	$\sim$ $\parallel$	6.4 C	ITY-9	SI- <i>2</i> IP	140
14 I hereby c	ertify that the informat	ion supplied with	this filing does not qualify	for the ex-	emc	ntion stated	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of officer or o	on this annual report of director of the corpora	or supplemental i tion or the recally	annunt report it true and a rer or truster, einnowered t	ccurate an o execute	a th this	iat my sign report as i	nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in
Block 12 d	or Block 13 if changed	l, or on an attach	mont with in address.		,		