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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 04 1998 8:00am

Secretary of State

a kodiládk éle íðlei. Óllók þakk delki delki dólki dólki eideð ekini óldið tilði liðk þog

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000043461 (9)

VALUE MART OF NORTHWEST FLORIDA, INC.

Principal Place of Business Mailing Address						T SANIONS ILA JAIS! APIN AUDIN AUDIN AU	III OBYL DIODO	i ektel Almin il	191 (187 1991
18771 US HW	Y 331 SOUTH	1877 US HW	1877 US HWY 331 SOUTH						
FREEPORT FL	. 32439		FREEPORT FL 32439			DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualified	, IN THIS S	PACE	
						05/30/1995			
2. Principal P	ace of Business	2a. Mailing A	ddress			4. FEI Number			pplied For
21		26	301000			59-3328679			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt	. #, etc.						Additional
22		27				5. Certificate of Status Desired			equired
City & State		City & Sta	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zφ		Country		8. This corporation owes or has pa			tangible
24	25 29 30			Personal Property Tax due June 30. Dayes No			☐ No		
	g. Name and Address of	Current Registered Age	nt			10. Name and Address of New Re	gistered A	gent	
	LER, HERBERT L JR.			81	Name				
	71 US HWY 331 SOUTH			62	Street Addr	et Address (P.O. Box Number is Not Acceptable)			
FRE	EEPORT FL 32439								
				83					
				84	City			85 Zip	Code
							<u>FL</u>	ل_ا	
office or re	to the provisions of Sections 6 eglstered agent, or both, in th m familiar with, and accept th	ie State of Florida. Such el	iange was autho	orized by	the corporat	poration submits this statement for the plion's board of directors. I hereby acce	ourpose of options the appointment	changing it intment as	ts registered registered
SIGNATURE									ľ
	Signature, typed or printed name of regi-		(NOTE Rec		il signature recuir	ed when reinstating)	DATE		
12.	OFFICE	RS AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	
TITLE	MILLER, HERBERT L JE		DECETE	1.1 TITLE			·	creange	Addition
NAME	18771 US HWY 331 SC		ď	1.2 NAME					}
STREET ADDRESS	FREEPORT FL	חוטכ		1.3 STREET					
CITY-ST-ZIP TITLE	THEEFONI PL		DEI.ETE	1.4 CITY - ST 2.1 TITLE	- ZIP			Change	Addition
		اسما					·	T Culturbe	Addition
NAME				22 NAME					
STREET ADORESS			1	23 STREET		;	* •		
CITY-ST-ZIP TITLE			DEI ETE	2.4 CITY - S 3.1 TITLE	1 - ZIP			Change	Addition
NAME		_		3.2 NAME			L	vialite	Rudilloll
STREET ADDRESS				3.3 STREET	ADDRESS				
					1				
CITY-ST-ZIP TITLE			DELETE	3.4. CITY - S 4.1 TITLE	1 · Zir			Change	Addition
NAME		L _		4. 2 NAME					
STREET ADDRESS			ľ	4.3 STREET	IDDBESS				ľ
CITY-ST-ZIP					1				
TITLE			DELETE	4.4 CITY - ST 5.1 TITLE	-zir			Change	Addition
NAME .		I		5.2 NAME			ı	onange	
STREET ADDRESS				5.3 STREET	ADDDCCC				
1			4		ſ				}
CITY-ST-ZIP TITLE	<u> </u>			54 CITY-ST 61 TITLE	- ZIF		 -	Change	Addition
NAME		ليا					L	onengo	- radicion
STREET ADDRESS				62 NAME	NDDDCCC				
CITY, CT. 7IP				63 STREET	ADUKE SS				

14. Thereby 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 annual report or suppliemental 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 on bowered 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 an address.