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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

NAME

1998 .



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000049977 (8)

BURLINGAME AUCTION CENTER INC

DOTIE	TOTAL POOTON CENTER 1								
Principal Plac	ce of Business	Mailing Address				- i smilliage trik sarat åtter anere nåter tåter og er gra	a rolly 1911f (Y	PT: 1081 (09)	
P.O. BOX 760		P.O. BOX 780							
GLENHAM NY 12527 GLENHAM NY 12527						DO NOT MOTOR IN THE	00105		
US		US				DO NOT WRITE IN THIS 3. Date incorporated or Qualified	SPACE		
						06/26/1995		_	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Α	pplied For	
1 26						65-0590017		lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional lequired	
City & Stat	te	City & State				Election Campaign Financing Trust Fund Contribution		May Be I to Fees	
Z _I p	Country 25	Zip 29	Cour 30	itry		8. This corporation owes or has paid the cu	rent year Ir		
-71	9. Name and Address of Curren		1991			10. Name and Address of New Registered			
CC	PRPORATION CREATIONS ENTER			81	Name				
4521 PGA BLVD.				B2	Street Addre	et Address (P.O. Box Number is Not Acceptable)			
SUITE 211				_		sas (F.O. Box Horrison is Not Acceptable)			
PA	LIM BEACH GARDENS FL 33418		[1	B3					
			ļ,	84	City	FL	85 Zip	Code	
SIGNATURE	Signature, typed or printed name of registered age:	nt and little if applicable (NOT	E. Registered			oration submits this statement for the purpose o on's board of directors. I hereby accept the app ad when reinstating) DATE			
12.	OFFICERS AND	DELETE	13.	_		ADDITIONS/CHANGES TO OFFICERS AND	Change	HS IN 12	
NAME	BURLINGAME, SCOTT A	L. J Decent	1.2 NAM				L_1 Change		
STREET ADDRESS	21 RYMPH BLVD.			-	ADDRESS				
CITY-ST-ZIP	POUGHKEEPSIE NY 12601		1.4 CITY-						
TITLE	D	DELETE	2.1 TiTLE		- 211		Change	Addition	
NAME	BURLINGAME, RICHARD A		2.2 NAN	ΛE					
STREET ADDRESS	103 MAIN STREET		2.3 STR	EET A	ADDRESS				
CITY-\$1-ZIP	POUGHKEEPSIE NY 12601		2. 4 CITY-ST-ZIP		r-ZIP				
TITLE		DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NAM	Æ					
STREET ADDRESS			3.3 STR	EET /	ADORESS .				
CITY-ST-ZIP		TT 05:	3.4. CITY-5		r- ZIP		T 201	Adam	
TITLE		☐ DELETE	4.1 TITLE		1		☐ Change	Addition	
NAME .			4. 2 NAJ		ADDOCC				
STREET ADDRESS			4.3 STH		VODRESS				
CITY-ST-ZIP TITLE		DELETE	5.1 TOTA		- 211-		Change	Addition	
NAME			5.2 NAN				_,		

14. 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 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 an address.

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE: SCOT A BUTLINGOM O BUTLINGOME

DELETE

CR2E034 (10/97)

Change

FILED

May 11 1998 8:00am

Secretary of State