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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000055992 (8)

ANTIQUES OF VERO, INC.

Principal Place of Business Mailing Address 4404 SUNSET DR. 4404 SUNSET DR. VERO BEACH FL 32963-1214 VERO BEACH FL 32963 3a. Date of Last Report 3. Date Incorporated or Qualified 06/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RENNICK, STEVE 4404 SUNSET DR. R2 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32963 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am farmear with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typied or printed name of registered agent and tito if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)OFFICERS AND DIRECTORS 12. 13. Change DELETE 1.1 TITLE THEF RENNICK, STEVEN 1.2 NAME CR2E034 NAME 4404 SUNSET DR. 1.3 STREET ADDRESS STHEE: ADDRESS VERO BEACH FL 32963 CIFY-ST 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS C(1Y+S)+2IP 2.4 CITY-ST-ZIP DELETE Change Addition THEF 3 1 TITLE 3.2 NAME NAME: STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CiTY - S1 - ZIP DELETE Change Change Addition Tille 41 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CiTY-ST-ZiP City St - 269 DELETE 51 TITLE

14. If do 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

DILE

NAME

STREET ADDRESS

STREET ADDRESS

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