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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLOHIDA DEPARTMENT OF STATE

**FILED** 

Jun 17 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # P9500 WHOLESALE CO.	0056736 (8	)		
Principal Place of Business Mailing Address					40 DIAN 10000 INIA DIA 1901
3250 N 29 AVENUE 3250 N 29 AVENUE					
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020			)		
US		U\$		DO NOT WRITE IN THIS	SPACE
				<ol> <li>Date Incorporated or Qualified</li> <li>07/21/1995</li> </ol>	
2 Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
26		F		65-0595507	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
27		27		5. Certificate of Status Desired	Fee Required
City & State	9	Cily & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	25 9. Name and Address of Curre	nt Registered Agent	30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
	JSSMAN, JAY D	In registerou Agent	81 Name		- Aguir
	81 NW 151, STE. 101			CT Corporation Systems	
	AMI LAKES FL 33014		82 Street A	Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road	
17707	an D 1120 1 2 300 14		83	2200 004011 1110 2014114 11044	
			84 City	Plantation <b>FL</b>	85 Zip Code 33324
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stat	ules, the above-named	corporation submits this statement for the purpose operation's board of directors. I hereby accept the app	
office or ri	egi <b>ste</b> red agent, or both, in the State m <b>_fam</b> iliar with, and accept the oblig	e of Florida. Such change was nations of, Section 607.0505, I	s authorized by the corp Florida Statutes.	poration's board of directors. I hereby accept the app	ointment as registered
SIGNATURE.	\ P \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11 0	11 .	JULY AST SEC 6 1:	298
	Signature typed or printed name of registered ag	· · · · · · · · · · · · · · · · · · ·	HAVIE A- EN DIL: Hegislered Agent signature	required whon reinstating) DATE	
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	LOWY, CRAIG	DELETE	1.1 TITLE	P/D	Change Addition
NAME	3250 NN 29 AVENUE	·	1.2 NAME	Terrance H. Gregg	
STREET ADDRESS	HOLLYWOOD FL		1.3 STRFET ADDRESS	12744 San Fernando Road	
CITY-ST-ZIP	D	<b>K</b> DELFTE	1.4 CITY - ST - ZIP 2.1 TITLE	Sylmar, CA 91344 V/S/D	Change X Addition
NAME	KUSHER, ROBERT	Parkitte	2.2 NAME	Eric S. Kentor	CA ROUNDI
STREET ADDRESS	3250 N 29 AVENUE		2.3 STREET ADDRESS	12744 San Fernando Road	
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-ST-ZIP	Sylmar, CA 91344	
TITLE		DECETE	3.1 TITLE	V/D	Change Addition
NAME			3.2 NAME	Kevin R. Sayer	
STREET ADDRESS			3.3 STREET ADDRESS	12744 San Fernando Road	
CITY-S1-ZIP			3.4. CITY - ST - ZIP	Sylmar, CA 91344	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		<del></del>
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-SY-ZIP		D DELETE	5.4 CITY - ST - ZIP		Character Laborate
TITLE		☐ DELETE	6.1 NITLE	spoppassesi	Change Addition
NAME			6.2 NAME	-06/19/980110104	11 <b>/v /</b>
STREET ADDRESS			6.3 STREET ADDRESS	***150 <u>.00</u>	77.7

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 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 coefver 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.