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May 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000060446 (8)

1. Corporation Name  
LIQUIDATIONS GALORE, INC.



Principal Place of Business

16345 W. DIXIE HIGHWAY  
SUITE 107  
NORTH MIAMI FL 33160

Mailing Address

16345 W. DIXIE HIGHWAY  
SUITE 107  
NORTH MIAMI FL 33160-3708

3. Date Incorporated or Qualified  
08/04/1995

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21 17038 W. DIXIE HIGHWAY

2a. Mailing Address

26 17038 W. DIXIE HIGHWAY

Suite, Apt. #, etc.

22 SUITE # 107

Suite, Apt. #, etc.

27 SUITE # 107

City & State

23 NORTH MIAMI BEACH, FLA

City & State

28 NORTH MIAMI BEACH, FLA

Zip

24 33160

Country

Zip

29 33160

Country

30

9. Name and Address of Current Registered Agent

GARCIA, CHRISTINE  
12250 SW 17TH LANE  
#108  
MIAMI FL 33175

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME DORING, JANET  
STREET ADDRESS 12250 SW 17TH LANE #108  
CITY-ST-ZIP MIAMI FL 33175

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

PD  
DORING, JANET  
1030 NW 145TH TER  
MIAMI, FL 33168

Change Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. I 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.

SIGNATURE: Janet Doring JANET DORING

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/97 (305) 687-0408

Date Daytime Phone #

CR2E034 (9/96)