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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # P9

P95000071562 (9)

P.J.'S APPLIANCE DEPOT, INC.

Business Mailing Address

FILED
Apr 20 1998 8:00am
Secretary of State



minupai mac	SE OF DOSHIESS	IV18	Mailing Address								
2532 OKEECHOBEE BLVD. WEST PALM BEACH FL 33409			2532 OKEECHOBEE BLVD. WEST PALM BEACH FL 33409								
112011112	DENOTITE CONS	•	TEOT THEM DENOTED	E 33403			DO NOT WRITE IN THIS	SPAC	Œ		
							3. Date Incorporated or Qualified				
							09/13/1995				
2. Principal F	Place of Business	28.	Mailing Address				4. FEI Number		<u> </u>	Applied For	
21		26	9				65-0612490		-	ot Applicable	
Suite, Apt.	#, etc	- 1201	Suite, Apt #, etc.					¢		Additional	
22		27	7				5. Certificate of Status Desired	4		Required	
City & Stat	e		City & State				6. Election Campaign Financing	-			
23		28	ها ا				Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country		Zip	Cour	trv	,	· · · · · · · · · · · · · · · · · · ·				
24	25	29		30	,		 This corporation owes or has paid the or Personal Property Tax due June 30. 	III Y∈		ntangible No	
F-1	g, Name and Address of Curre		tered Agent	1301 T		**	10. Name and Address of New Registered			□ 140	
.10	TER, PAUL E SR.				B1	Name	10,	- ago			
	71 SLASH PINE CIRCLE										
					82 Street Address (P.O. Box Number is Not Acceptable)						
***	EST PALM BEACH FL 33409			<u> </u>	83						
				'	~						
ŀ				la la	34	City		85	Zır	Code	
					l	['	FI	_			
11. Pursuant	to the provisions of Sections 607.05	02 and 60	7.1508, Florida Stat	utes the abo	ονε	e-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of cha	nging	its registered	
agent La	im familiar with, and accept the obtain	aations of	ia. Such change was . Section 607.0505. I	s autnorized Florida Statu	by tes	/ the corporati	lion's board of directors. I hereby accept the ap	pointn	ient a	s registered	
SIGNATURE	•										
SIGNATORE	Signature typed or printed name of registered a	gent and title i	f applicable (NO	OTE: Registered	Ape	ant signature require	red when reinstating) DATE				
12.	OFFICERS AF	ND DIREC	TORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIR	ECTO	RS IN 12	
TITLE	VTD		DELETE	1.1 1176	E				Change		
NAME	Warner, Judith L			1.2 NAN	ŧΕ						
STREET ADDRESS	1271 SLASH PINE CIR.			i i		ADORESS					
CITY-ST-ZIP	WEST PALM BEACH FL 334	109		14 CIT							
TITLE			DELETE	21 TITL		1-217		177	Change	Addition	
NAME				22 NAM				ш,	A Kai ng C	L Adolosii	
STREET ADDRESS										-	
						ADDRESS					
CITY-ST-ZIP TITLE		-	DELETE	2.4 C(T	_	iT-ZiP		т.			
	•		☐ DEEE IE	3 1 TITL			•	Ц(Change	Addition	
NAME				3.2 NAN		l					
STREET ADDRESS				3.3 STR	EET.	ADDRESS				4	
CITY - ST - ZIP			-·· <u></u>	3.4. CIT	Y - S	IT - ZIP					
TITL€			DELETE	4.1 TITL	E				Change	☐ Addition	
NAME				4. 2 NAA	ΛE						
STREET ADDRESS				4.3 STRI	ET.	ADDRESS					
CITY-ST-ZIP				4.4 CITY	- S1	T- ZIP				}	
TITLE			DELETE	5.1 TITU					Change	Addition	
NAME				5.2 NAM					•		
STREET ADDRESS					-	ADDRESS				j	
City-St-7iP										ļ	
TITLE			☐ DÉLETE	5.4 CITY		1-516			haces		
			בו עננונ	6.1 TITE				ш	Change	Addition	
NAME				6.2 NAM							
STREET ADDRESS				6.3 STRE	ET	ADDRESS					
CITY-ST-ZIP				6.4 CITY	- 51	f-ZIP					

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.

SIGNATURE: Deckete & Warner

4/13/98 561-615-6228