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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000078698 (4)

CLOSETS, ETC., INC.

Principal Place of Business Mailing Address

828 SE 167H PL 828 SE 167H PL DEERFIELD BEACH FL 33441

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. Suite, Apt. #, etc.

FILED Feb 24 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

						10/09/1995		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applie	ed For
21		26	26			65-0632314	Not A	pplicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Add	
22		27				S, Collinguity of States Desired	Fee Requi	ired
City & State	Ď	City & State				6. Election Campaign Financing	\$5.00 ма	ıy Be
23		28				Trust Fund Contribution	Added to F	00S
Žip	Country	Ζίρ	Count			This corporation owes or has paid the currer		
24	25	[29]	30			Personal Property Tax due June 30.		ю
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Ag	ent	
Linden, Edward W Jr.					Name			
828 SE 16TH PL.				82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
DEERFIELD BEACH FL 33441								
				83				
				84	City		85 Zip Cod	de
				-	J.,	FL 5 5 5 5 5 5 5 5 5		
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 agont, 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 ago			d Age	nt signature requi	ked when reinstating) DATE		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE				1.1 TITLE		· L	Change L	Addition
NAME LINDEN, EDWARD W JR.			1.2 N	AME				
STREET ADDRESS	828 SE 16TH PL.	1.3 \$		TREET	ADDRESS			
CITY-ST-ZIP	DEERFIELD BEACH FL 33441			1.4 CITY-ST-ZIP				
TITLE	☐ DELETE			2.1 TITLE		L	_ Change	Addition
NAME			2.2 N/					
STREET ADORESS			2.3 \$	TREET.	address			
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP		ST - ZIP			
TITLE		3.1 7	3.1 TITLE			Change [Addition	
NAME			3.2 NA					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. 0	3.4. CHTY-ST-ZIP				
TITLE	☐ DELETE			4.1 TITLE			Change [Addition
NAME			4.2 N	IAME				
STREET ADDRESS			4.3 \$	TREET	ADDRESS			
CITY-ST-ZIP			4.4 0	ITY-S1	1-ZIP			
TITLE		DELETE	5.1 T	TLE			Change	Addition
NAME			52 N	AME	ĺ			
STREET ADDRESS			5.3 5	TREET.	ADDRESS		,	
CITY-ST-ZIP			5.4 0	(TY-\$1	T-21P			
TITLE		DELETE	6.1 TI				Change	Addition
NAME	-		6.2 N	AME				
STREET ADDRESS			6.315	TAEET	ADDRESS	•		ļ
CITY-ST-ZIP				ITY-SI	1			
	certify that the information supplied w	ith this filing does not qualify f				Section 119.07(3)(i), Florida Statutes. I further certif	y that the info	ormation
14. I hereby certify that the information supplied with this filing does not qualify for the comption 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 in that my signature shall have the same legal effect as if made under oath; that I am an								

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