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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 13 1998 8:00am

Secretary of State

Change

■ Addition

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

P95000080392 (0)

TRADERS MART INTERNATIONAL CORP.

THOSE WATER THE PROPERTY OF THE						
Principal Place of Business	Mailing Address		_		1 100110001 110 10101 TILLI OBLIL OBLIL OBLIL OBLIL OBLIL I	0):10 0.010 11110 19110 1101 1001
80 WEST PALM DRIVE 80 WEST PALM DRIVE MARGATE FL 33063 MARGATE FL 33063				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					10/19/1995	
2. Principal Place of Business	2a, Mailing Address				4. FEI Number	Applied For
21	26				65-0616754	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22	27				5. Cermicate of Status Desired	Fee Required
City & State	City & State				6. Election Campaign Financing	\$5.00 May Be
23	28				Trust Fund Contribution	Added to Fees
Zip Country	L_ Zip		intry		8. This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible ☐ Yes ☐ No
24 25 25 Name and Address of Current		30	r		10. Name and Address of New Registered	
			81	Name	10.	
GILL, CREGORN C 80 W. PALM DR.	perrey				(D.C. De N. entre in Mr. Accessorie)	
MARGATE FL 33063			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
MANGATE FL 33003			вз			
			84	City		85 Zip Code
				,	FL	.
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State cagent. I am familiar with, and accept the obligat SIGNATURE.						r changing its registered pointment as registered
Signature, typed or printed name of regularity agent	,		d Age	nt signature require		DIDECTOR N. 40
12. OFFICERS AND	DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME PSTD RAME GILL, GEOFFREY C	L Deceir	1.2 NAME 1.3 STREET				
NAME GILL, GEOFFREY C STREET ADDRESS 80 WEST PALM DRIVE				ADDRESS		
CITY-S1-ZIP MARGATE FL 33063		1.4 CITY - S				
TITLE	DELETE	2.1 71				Change Addition
NAME		2.2 N	AME.	1		
STREET ADDRESS		2.3 \$	TREE 1	ADDRESS		
CITY-SI-ZIP		2.40	3-YTK	ST-ZIP		
TITLE	☐ DELETE	3.1 ₹	TLE			Change Addition
NAME		3.2 N	AME			
STREET ADDRESS		1		ADDRESS		
City-S1-ZiP	Drift	_		S1 - ZIP		Change Addition
TITLE	L DEŁETE	4.1 70				C change C Acquion
NAME		4.21		ADDDICC		
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP	DELETE	44 C	ITY-S	t- TIL.		Change Addition
NAME	E- Deceie	52 N				· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS				ADDRESS		

CITY-ST-ZIP 14. 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.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY - \$1 - ZIP

6.1 TITLE

6.2 NAME

DELETE