SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # P95000082873 (7) GREENACRES SHOPPER'S DEPOT, INC.



Principal Place of Business Mailing Address 3911 JOG ROAD 3911 JOG ROAD									
3911 JOG ROAD GREENACRES F		GREENACRES FL 33467							
						3. Date Incorporated or Qualified 10/30/1995	3a. Date	of Last Report	
2. Principal Pia	ce of Business	2a. Mailing Addr	ess			4. FEI Number 65-0539304		Applied For	
		26 Suite, Apt. #.	nio.			W3-03-01301		\$8.75 Additiona	
Suite, Apt.#,	etc	27 Suite, Apr. #.	eic			5. Certificate of Status Desired		Fee Required	
City & State		City & State				6. Election Campaign Financing		\$5.00 May Be	
3		28				Trust Fund Contribution		Added to Fees	·········
Z _{(p}	Country	Zip		Count	ry	8. This corporation has liability for i		xunders 193032 No	
<u> </u>	9. Name and Address of Currer	29	1	30		10. Name and Address of New Re	<u> </u>		
		it negistered Agent		8	1 Name		T 1000		
	IGS, INC.			8	2 Street Add	ress (P.O. Box Number is Not Acceptab	ie)		
	N.W. 16TH STREET								
FOR	T LAUDERDALE FL 33311			8	3				
				8	4 City		FI	85 Zip Code	
						poration submits this statement for the pi ion's board of directors. I hereby accept	FL	ana na ita ragistar	
12.	signature type for self-none of registered ago OF HICERS AN	ID DIRECTORS	DELETE	13.		and when tensionary) ADDITIONS/CHANGES TO OFFICE	CERS AND I		Mit on
NAME	BERHOFF, LLOYD			1 2 NAN	AE .				
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Too needy 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 logal effect as if 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 logal 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 617. Florida Statutes, and that my name appears in Block 13 if chapted, or on an attachment with an address

SIGNATURE:

LLOYD BERNET 15/14