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 # P95000086656 (2)

SURPLUS MERCHANDISING CENTERS. INC.

Country

Principal Place of Business Mailing Address 4124 PARK BOULEVARD 2164 15TH CIR. N. PINELLAS PARK FL 34065 ST. PETERSBURG FL 33713 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.

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City & State

9. Name and Address of Current Registered Agent OLSON, STEWART O BARNETT TOWER, STE. 1210 **ONE PROGRESS PLAZA**

ST. PETERSBURG FL 33701

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Zip

City & State

	Personal Property Tax due June 30 Yes No						
	10. Name and Address of New Registered Agent						
61	Name						
82	Street Address (P.O. Box Number is Not Acceptable)						
83							
84	City E1 85 Zip Code						

3. Date Incorporated or Qualified

11/06/1995

59-3342207

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

FILED

Apr 30 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

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.

Country

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SIGNATURE	=						
	Signature, typed or printed name of registered agent and		Registered Agent signature requi				
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	DELETE	1.1 TITLE	Change	☐ Addition		
NAME	CARRELL, RICHARD M		1.2 NAME				
STREET ADDRESS	1315 GLENVIEW LN		1.3 STREET ADDRESS				
CITY-ST-Z#P	LAKELAND FL		1.4 CITY - ST - ZIP				
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change	☐ Addition		
NAME	CARRELL, JUDY		2.2 NAME				
STREET ADDRESS	1315 GLENVIEW LIN		2.3 STREET ADDRESS				
CITY-ST-ZIP	LAKELAND FL		2. 4 CITY - ST - ZIP				
TITLE	DV	☐ DELETE	3.1 TITLE	Change	Addition		
NAME	DEPUGH, YVONNE		3.2 NAME				
STREET ADDRESS	2164 15CIR N.		3.3 STREET ADDRESS				
CITY-ST-ZW	ST. PETERSBURG FL		3.4. CITY-ST-ZIP				
TITLE	DST	DELETE	4.1 TITLE	☐ Change	☐ Addition		
NAME	DEPUGH, ROBERT V		4.2 NAME				
STREET ADDRESS	2164 15 CIR N.		4.3 STREET ADORESS				
CITY-ST-ZHP	ST. PETERSBURG FL		4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE	☐ Change	■ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE	Change	Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY_ST_7IP			64 CITY, ST. 7IP				

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 suppliermental 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.

4-22.98

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable