

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000004313 (8)

1. Corporation Name
S & S APPLIANCE SERVICE, INC.

Principal Place of Business

521 FOURTH STREET
HOLLY HILL

Mailing Address

521 FOURTH STREET
HOLLY HILL

FILED
Aug 12 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/12/1996

4. FEI Number

59-3349355

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

26 430 DOROTHY AVE
Suite, Apt. #, etc.

27

City & State

28 HOLLY HILL FL.

29

Zip

30117

Country

FLORIDA

City & State

23

Zip

Country

24

25

9. Name and Address of Current Registered Agent

SMEAD, WILLIAM R
521 FOURTH STREET
HOLLY HILL FL

10. Name and Address of New Registered Agent

81 Name SMEAD, WILLIAM R.

82 Street Address (P.O. Box Number Is Not Acceptable)

430 DOROTHY AVE

83

84 City HOLLY HILL

FL

85 Zip Code 32117

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SMEAD, WILLIAM R
STREET ADDRESS 521 FOURTH STREET
CITY-ST-ZIP HOLLY HILL

TITLE D ☐ DELETE

NAME SMEAD, NANCY L
STREET ADDRESS 521 FOURTH STREET
CITY-ST-ZIP HOLLY HILL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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: William R. Smead

7-31-98

901-252-2051

CR2E034 (5/98)

S & S APPLIANCE SERVICE, INC.

430 Dorothy Avenue
Holly Hill, Florida 32117
(904) 252-2051 & (904) 428-1237
Fax (904) 257-0377



July 13, 1998

To Whom It May Concern,

We have always paid in a timely manner, this year we never received our first notice as it was sent to the wrong address.

I received 2nd notice on Friday, July 10th, 1998 and am remitting \$165.00 by certified mail today July 13, 1998

Thank you
Nancy L. Arnold