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

PROFIT CORPORATION ANNUAL REPORT



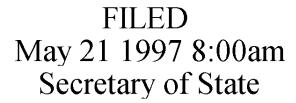
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000017421 (4)

X SALES, INC.





Principal Place of Business		Mailing Address		i idžindai nia idnim glisti obnik objet bovir sava: sišni tadin siana fibat mara	
9898A WATERMILL CIRCLE BOYNTON BEACH FL 33437		9898A WATERMILL CIRCLE BOYNTON BEACH FL 33437-2831			
political ber	10111 p. 10101	20 2 2	- • • • • • • • • • • • • • • • • • • •	3. Date Incorporated or Qualified 3e. Date of Last Report 02/26/1996	
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number Applied For	
21		26		65-0643840 Not Applicable	
Suile, Apt. #, etc.		Suite, Apt. #, et	, , , , , , , , , , , , , , , , , , , 	S8 75 Additional	
22		27		5. Certificate 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	
Ζιp	Country	Zip	Country	8. This corporation has liability for Intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes Yes No	
	g. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Agent	
ROE	ESSEL, EUGENE J(V)	(II)	81 N	BUGENE J. ROESSE	
	OA MATERIALI CIRCLE	c_ 1	82 St	treet Address (P.O. Box Number is Not Acceptable)	
	INTON BEACH FL 33437	Son		9898 A Watermill Circle	
55.			83		
ı	1		84 C	BOYNTON BEACH FL 85 Zip Code 38437	
11. Pursuant	to the providing of Sections 607.	0502 and 607, 1508. Florida	Statutes, the above-na		
office or r	egistered grat, or both, in the S	tate of to the Such change	was authorized by the	amed corporation submits this statement for the ourpose of changing its registered e corporation's board of directors. I hereby accept the appointment as registered	
agent. i a	m ta hiik with and accept the o	organony v, Section 607.05	o, riorida Statutes.	5/1/97	
SIGNATURE	Signature, typed or printed name of registere	clament and title it anglicable	/NOTE: Registered &gent si	gnature required when reinstating) DATE	
12.		AND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
10TLE		DELET		EUGENE POESSEL, PRES. Change Addition	
NAME		_	1.2 NAME	9898 A WATERMILL Circle	
STREET ADDRESS			1.3 STREET ADD		
				DOYNTON BEACH, TL. DOYS)	
CHTY-ST-ZIP TITLE		☐ DELE	1.4 CITY-ST-2)6 E 2.1 TITLE	Change Addition	
		La bitte	2.2 NAME	Breed Criticity Second Colors	
NAME					
STREET ADDRESS			2.3 STREET ADD		
CITY-ST-ZIP		DELE	2. 4 CITY - ST - ZI	Change Addition	
TITLE		ביין טנוני		Lui Change Lui Adulton	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADO		
CITY-ST-ZIP			3.4. C(TY-ST-Z)		
THLE		☐ DELE	E 4.1 TITLE	Change Addition	
NAME			: 4.2 NAME		
STREET ADDRESS			4.3 STREET ADD	DRESS	
CITY - ST - ZIP			4.4 CITY-ST-ZII		
TITLE		☐ DELE	E 5.1 TITLE	☐ Change ☐ Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADD	PRESS	
CITY - S1 - 7th			5.4 CITY - ST - ZI		
TITLE		DELE		Change Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADD	DRESS	
			6.4 CITY-ST-Z#	· ·	
CITY - ST - 7IP					

14. I do 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 repetity 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 coup ration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the appears in Block 12 or Block 1

SIGNATURE: