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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000021472 (1)

OLD-TIMER'S ANTIQUE MALL, INC.

Principal Place of Business Mailing Address			L POELHARL HIR COME COME COME COME COME COME COME COME		
9717-B SOUTH DIXIE HIGHWAY W PALM BEACH FL 33405		3717-B SOUTH DIXIE HIGHWAY W PALM BEACH FL 33405-2229			
				3. Date incorporated or Qualified 3a. 03/08/1996	Date of Last Report
Principal Place of Business  21	2a. Mailing Address 26			4. FEI Number 65-064671	Applied For Not Applicable
Suite, Apt #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	City & State		·	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Ζ(p	Cour	try	8. This corporation has liability for intang	
24 25 9, Name and Address of Curre		[30]		10. Name and Address of New Register	
	in riogistorou Agont		Name	10, 114110 014 1100 014 01 1101 1103 014	
NEITZ, ELIZABETH H 3717-B SOUTH DIXIE HIGHWAY W PALM BEACH FL 33405		Ĺ		dress (P.O. Box Number is Not Acceptable)	
		}	33	**************************************	
		}	64 City		85 Zip Code
11 Durawat to the provisions of Sections 6/17 051	12 and 607 1509 Storida Stat	utos the ab	Overpamed cor		
<ol> <li>Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent it am familiar with, and accept the oblige</li> </ol>	of Florida. Such change was actions of, Section 607.0505, F	s authorized Florida Statu	by the corporates.	ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE ELISABETH H. HE	to Elizabeth 1	7.Neit	2	uired when reinstating) OAT	28-97
	ID DIRECTORS	13.	- gori signata o requ	ADDITIONS/CHANGES TO OFFICERS /	AND DIRECTORS IN 12
TITLE D	DELETE	1.1 7(7)	E		Change Addition
NAME NEITZ, ELIZABETH H	<del>-</del>	1.2 NA	İ		
STREET ADDRESS % 3717-B SOUTH DIXIE HIGH	IWAY		EET ADDRESS		
W DAIM DEACH EL 2040E	,,,,,,,				
TITLE D	☐ DELETE	2.1 TIT	r-ST-ZIP		Change Addition
MEGTA DOMAID E	[_] breeze	2.2 NAI			C outride C requien
W 6747 D COLUMN DIVIE DIOL	IWAY		í		
W DALLA DEACH EL 20405	MIMI	1	EET ADDRESS	,	· ·
011 01 21	DELETE		Y-ST-ZIP		Change Addition
THLE	FTI DESCRIP	3.1 TIT	- 1		Change Addition
NAME		3.2 NA			
STREET ADDRESS			EET ADDRESS		
City-St-7iP	Dr. ree		Y-ST-ZIP		Change 2222
TITLE	☐ DELETE	4.1 TIT	ì		Change Addition
NAME		4. 2 NA	ME		
STREET ADDRESS		4.3 STF	EET ADDRESS		
CITY-ST-ZIP			(-ST-ZIP		
TITLE	DELETE	51 117	E .		Change Addition
NAME		5.2 NA	NE		•
STREET ADDRESS		5.3 STF	EET ADDRESS		
CITY-ST-ZIP		5.4 CIT	Y-ST-ZIP	<u> </u>	
The state of the s				····································	Aliana Latabia
TITLE	DELETE	6.1 TIT	.E		Change Addition
TITLE NAME	[_] DELETE	6.1 TITI 6.2 NAI			Change Addition

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 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