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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000037465 (7)

1. Corporation Name
BUYMART.COM, INC.

Principal Place of Business
612 BELLE ISLE AVENUE
BELLEAIR BEACH FL 34634

Mailing Address
612 BELLE ISLE AVENUE
BELLEAIR BEACH FL 33786-3614



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 33786

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/30/1996

3a. Date of Last Report

4. FEI Number

59-3377707

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

DAVIS, JAMES R JR.
612 BELLE ISLE AVENUE
BELLEAIR BEACH FL ~~34634~~
33786

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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
NAME DAVIS, JAMES R JR.
STREET ADDRESS 612 BELLE ISLE AVENUE
CITY-ST-ZIP BELLEAIR BEACH FL ~~34634~~ 33786

TITLE D
NAME DAVIS, MARCIA E
STREET ADDRESS 612 BELLE ISLE AVENUE
CITY-ST-ZIP BELLEAIR BEACH FL ~~34634~~ 33786

TITLE D
NAME DAVIS, ROBERT SCOTT
STREET ADDRESS 230 JAY STREET, APT. 8-G
CITY-ST-ZIP BROOKLYN NY 11201

TITLE D
NAME POWELL, RICHARD M
STREET ADDRESS 780 HOLMBY AVENUE
CITY-ST-ZIP LOS ANGELES CA 90024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE D
5.2 NAME Allen L. Stevens
5.3 STREET ADDRESS 585 Old Stamford Rd.
5.4 CITY-ST-ZIP New Canaan, CT 06840

6.1 TITLE D
6.2 NAME Marcia Rivers
6.3 STREET ADDRESS 11863 Raintree Dr.
6.4 CITY-ST-ZIP Tampa, FL 33617

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 appears in Block 12 or Block 13 if changed, or in an attachment, with an address.

SIGNATURE _____ DATE 4/28/97

CR2E034 (9/96)