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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000038199 (1)

APPLIANCE CENTER VERO, INC.

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,但是我们的时候,我们就是我们的时候,我们就是我们的时候,我们就是我们的时候,我们的时候,我们就是我们的时候,我们就是我们的时候,我们们也是什么,我们的时候,我们 1966年,我们就是我们的时候,我们就是我们的时候,我们就是我们的时候,我们的时候,我们们的时候就是我们的时候,我们就是我们的时候,我们们们也是是我们的时候,我们

FILED May 18 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address							
	OTTH AVENUE	1400 N.W. 107TH AVENUE								
MIAMI FL 33172		MIAMI FL 33172				DO NOT WRITE IN THIS SPACE				
Į					3. D	ate incorporated or Qualified				
					i	05/02/1996				
2. Principal P	lace of Business	2s. Mailing Address				00/02/1990 El Number		TA	pplied For	
	ace of Eddings	<u>⊢</u> 1			"''				ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				65-0662714				
22		27			5. C	ertificate of Status Desired			Additional equired	
City & State		Crty & Stato			R E	lection Campaign Financing		\$5.00	May Be	
23		28				rust Fund Contribution			to Fees	
Zip	Country	Zip	ntry		8. This corporation owes or has paid the current year Intangible					
24	25	├ ŋ '	29 30		Personal Property Tax due					
241	9. Name and Address of Current					10. Name and Address of New Registered Agent				
				81 Nam						
SIEGEL, STEVEN T				6	Levy, J	Toel				
1400 N.W. 107TH AVENUE			ſ			. Box Number is Not Accepta	•			
Mi	AMI FL 33172		ļ		100 N.	W. 107+4 AVG	PAUC_			
				83						
			ŀ	84 City		, 		85 Zip	Code	
					Miami		FL		172-	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statut	es the at	ove-name	ed corporation s	submits this statement for the	purpose of c	hanging i	ts registered	
office or r	egistered agent, or both in the State im familiar with and accopt the coling	ot Florida. Such change was i itions.of. Section 607.0505. Fl	autnorized orida Stati	a by the co utes.	orporation's boa	ard of directors. I hereby acc	ept the appoi	ntment as	registered	
_	In Lu	1	*						1	
SIGNATURE	Signature typed or printed name of registered type	and title if applicable (NOT	E Registered	Agent signatu	ure required when rais	natating)	DATE		l <u>.</u>	
12.	OFFICERS AND	DIRECTORS	13.		AD	DITIONS/CHANGES TO OFF	ICERS AND D	IRECTO	RS IN 12	
TITLE	DP	DELETE 1.1 T		LE			T	Change	Addition	
NAME	SI EGEL, STEVEN			ME						
STREET ADDRESS	1400 N.W. 107TH AVENUE		13 ST	1.3 STREET ADDRESS					[3	
CITY-ST-ZIP	MIAMI FL 33172			1.4 CITY-ST-ZIP					1	
TITLE	ČEOD			LE	10/0/0	EO	2	Change	Addition	
NAME	ADLER, MICHEAL			ME	1-7-70					
STREET ADDRESS	1400 N.W. 107TH AVENUE			2.3 STREET ADDRESS					İ	
	MIAMI FL 33172								1	
CITY-ST-ZIP				2.4 CITY-ST-ZIP 3.1 TITLE				Change	Addition	
TITLE				1				7 Cularièr		
NAME	LEVY, JOEL		3.2 NA							
STREET ADDRESS	1400 N.W. 107TH AVENUE		3.3 ST	REET ADDRESS	3					
CITY-ST-ZIP	MIAMI FL 33172			TY-ST-ZIP				1 2:		
TITLE	AS	DELETE	4.1 TH	LE			L.	Change	☐ Addition	
NAME	ADLER, LINDA K		4. 2 N/	AME					[
STREET ADDRESS	1400 N.W. 107TH AVENUE		4.3 ST	reet address	6				1	
CITY+ST-ZIP	MIAMI FL 33172		4.4 CII	IY-ST-ZIP						
TITLE	\$T	DELETE	5.1 TIT	LE			L	Change	☐ Addition	
NAME	A RRIZURIETA, LUIS		5.2 NA	ME					İ	
STREET ADDRESS	1400 N.W. 107TH AVENUE		5.3 ST	REET ADDRESS	;				Į	
CITY-ST-ZIP	MIAMI FL 33172			Y-ST-ZIP	i					
TITLE		DELETE	6.1 711		1		T	Change	☐ Addition	
NAME			6.2 NA				_	•	— \	
STREET ADDRESS				reet address	<u>.</u>					
			I.		']					
CITY-ST-ZIP	L		6.4 CIT	Y-ST-ZIP						

14. Thereby 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 suppliemental annual copyrities frue 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 of 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.