

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

97 AUG -1 AM 8:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000041419 (8)

1. Corporation Name
OFFICE LIQUIDATORS, INC.

Principal Place of Business
744 E. VENICE AVE.
VENICE FL 34292

Mailing Address
744 E. VENICE AVE.
VENICE FL 34292

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/15/1996 3a. Date of Last Report 2-27-97

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0662178 Applied For Not Applicable

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State 27 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country 28 Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

HOWE, DONALD S
744 E. VENICE AVE.
VENICE FL 34292

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 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
			P DONALD S. HOWE
		1.3 STREET ADDRESS	744 E. VENICE AVE
		1.4 CITY-ST-ZIP	VENICE FL 34292
		2.1 TITLE	SIT
		2.2 NAME	LINDA HOWE
		2.3 STREET ADDRESS	744 E. VENICE AVE
		2.4 CITY-ST-ZIP	VENICE FL 34292
		3.1 TITLE	V
		3.2 NAME	KEVIN MCCLLOUD
		3.3 STREET ADDRESS	6515 TIDWELL
		3.4 CITY-ST-ZIP	NORTH PORT, FL 34287
		4.1 TITLE	600002259528
		4.2 NAME	-08/06/97-01075-014
		4.3 STREET ADDRESS	****165.00 ****165.00
		4.4 CITY-ST-ZIP	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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, and in an attachment with an address.

SIGNATURE: DONALD S. HOWE 7-28-97 941-485-7015

CR2E034 (4/97)