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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 11 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000045780 (9)

SKILLED TRADESMEN OUTLET, INC.

					-		
Principal Place of Business Mailing Address						i milian merti fanal ilisti Afti 665	
3074 JOG RD		3074 JOG RD					
LAKE WORTH FL 33467 US		LAKE WORTH FL 33467 US				DO NOT WRITE IN THIS SPACE	
03		US	,			3. Date Incorporated or Qualified	110 07 7 102
						05/23/1996	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26	26			65-0669889	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27	27			5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23]		Z <sub>Q</sub> Country				Trust Fund Contribution	Added to Fees
Zip			untry	6. This corporation owes of has paid the current year intangible			
24	25   A. Name and Address of Curr	29 30 30 Current Registered Agent		т		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
9, Name and Address of Current Registered Agent					Name	10. Name and Address of New Register	aa Agant
	NNER, ROBERT JR.						
	4 JOG RD KE WORTH FL 33467			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
LAP	E WURITIFL 3340/			83	.†		
				L			
				84	City	F	85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid</li> </ol>				bove d by	e-named corp y the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the	e of changing its registered appointment as registered
	ir igitimen with, and accept the ear	igations of, Section 607,0000	, rionua ota	iuis	5.		
SIGNATURE Signature, typed or printed runner of registered agent and take if applicable (NOTE: Registe					ent signature requir	red when reinstating) DAT	E
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 11	TLE			Change Addition
NAME	RENNER, ROBERT JR.		1.21				
STREET ADORESS	3074 JOG RD		1.3 \$	TREET	r address		
CITY-ST-ZIP	LAKE WORTH FL		T		ST - ZIP		
TITLE		☐ DELETE	211				Change Addition
NAME			22 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2. 4 C 3.1 Ti		ST - ZIP	Marie 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change Addition
NAME		בן מנונונ	3.1 II				C outride T volution
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP					ST-ZIP		
TITLE		☐ DELETE	4.1 TI		J1 411	*	Change Addition
NAME		_	4.2 N				
STREET ADDRESS			4.3 S	IREET	ADDRESS		
CITY-ST-ZIP					ST-ZIP		
TITLE		DELETE	5.1 T(				Change Addition
NAME	•		5.2 N	AME			
STREET ADDRESS			5.3 \$1	IREET	ADDRESS		
CITY-ST-ZIP			5.4 CI	ITY-S	ST-ZIP		,
TITLE		DELETE	. 6.1 TI				Change Addition
NAME			6.2 N	AME			
STREET ADORESS			6.3 ST	REET	ADDRESS		

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 of supplicruental 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 chapted, or or an attachment with an address.