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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000049171 (7)

MOBILE MART, INC.

Principal Plac	a of Rusinass	Mailing Address	······································						
(DOMINGDALE AVE.	813 EAST BLOOMINGDALE AVE. SUITE 245 BRANDON FL 33511-8113							
			·			3. Date Incorporated or Qualified 06/06/1996	3a. Date	e of Last Re	eport
<u> </u>	lace of Business	2a. Mailing Address				4. FEI Number			oplied For
21	4 - 1 -	Suite, Apt. #, etc.				59-3382552			of Applicable
Suite, Apt.		27				Certificate of Status Desired		\$8.75 / Fee Re	equired
City & Stat	e	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00	
23 Zip	Country	28 Z _{ID}	Zip Country			· · · · · · · · · · · · · · · · · · ·		Added t	
24	25 29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			. 199.002,		
C.1	9. Name and Address of Curren		17.7			10. Name and Address of New Re	gistered A	gent	
НО	PE, BOB M			61	Name				
	EAST BLOOMINGDALE AVE.			82	Street Addr	ess (P.O. Box Number is Not Acceptate	ole)		
	TE 245			1					
BR/	ANDON FL 33511			83					
				84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Stati	utes, the al	pove	-named corp	poration submits this statement for the p		hanging it	s registered
office or i	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, F	s authorize Florida Stat	d by tutes	the corporat	poration submits this statement for the prior ion's board of directors. I hereby acceptions	at the appoi	intment as	registered
SIGNATURE	· -								
	Signature, typed or printed name of registered age			d Age	nt signature requir	ed when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS DELETE	13.	TIF		ADDITIONS/CHANGES TO OFFIC			S IN 12
TITLE	PD HOPE, BOB M	LJ DELETE	1.1 Ti					Change	L Addition
NAME OXOLLA ADDRESO	3956 APPLEGATE CIRCLE		1.2 N		2020000	•			
STREET ADDRESS CITY-ST-ZIP	BRANDON FL 33511		4	incei ITY-S1	ADDRESS				
TILE	STD	DELETE	2.1 TI		1-211			Change	Addition
NAME	HOPE, JEAN D		2.2 N/	2.2 NAME					
STREET ADDRESS	3956 APPLEGATE CIRCLE	2.3		2.3 STREET ADDRESS					
CITY - ST - ZIP	BRANDON FL 33511		2.40	2. 4 CITY-ST-ZIP		·			
TITLE			3.1 Ti	TLE			I	Change	Addition
NAME			3.2 N/	AME		·			
STREET ADDRESS			3.3 \$1	TAEET	ADDRESS				
CITY-ST-ZIP		T December		ITY-S	I-ZIP		······································	7.00	The same
TITLE		L DELETE	4.1 TI				L	Change	Addition
NAME			4.2 N		ADDRESS				
STREET ADORESS					ADDRESS				
CITY-S1-ZIP TITLE		DELETE	5.1 T)	ITY - S'	1-217		T	Change	Addition
NAME			5.2 N				•		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			1	iTY-S					
TOLE		DELETE	6.1 TI				Ī	Change	Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 \$	TREET	ADDRESS				
City-St-ZiP				TY-S					
information	on indicated on this annual report or s	supplemental annual report is rithe receiver or trustee empo	strue and a owered to a	accu	rate and that	d in Section 119.07(3)(i), Florida Statute i my signature shall have the same lega it as required by Chapter 607, Florida S	al effect as i	if made un	der oath; that

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF

Jean D. Hope

2/3/97 (813)685-6584

FILED

Feb 12 1997 8:00am

Secretary of State