SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074698 (7)

ANTIQUE HOUSE, INC.

1998

Principal Place of Business 1841 DEAN RD

JACKSONVILLE FL 32216

Mailing Address

1841 DEAN RD

JACKSONVILLE FL 32216

FILED Aug 07 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

							09/05/1996	
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number	Applied For
21							59-3404590	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State				6. Election Campaign Financing	\$5.00 May Be
23							Trust Fund Contribution	Added to Fees
Zip	Country	L	Zıp	Country			8. This corporation owes or has paid the correct year Intangible	
24 25 29 30				30				
	9. Name and Address of Currer	nt Regist	tered Agent		. 7		10. Name and Address of New Registered A	ent
	erman, leonard M			[81	۱	Name		
9116 CYPRESS GREEN DR					82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 207								
JACKSONVILLE FL 32258					3			
i I				84	4	City	FL	85 Zip Code
office or	registered agent, or both, in the State am familiar with, and accept the oblig	of Florid ations of	da. Such change was a f, section 607.0505, Fla	authorized by oride Statute	yt es.	the corporatio	ration submits this statement for the purpose of cha on's board of directors. I hereby accept the appoint	
	Signature, typed or printed name of registered age				Age	ent signature requir	ired when reinstating) DATE	
12.	OFFICERS AN	ID DIRE		13.		— —	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D HANCON HOLLY C		DELETE	1.1 TITLE			ــا	Change Addition
NAME	HANSON, HOLLY S			1.2 NAME				
STREET ADDRESS	14358 SANDY HOOK RD			1.3 STREE				
CITY-ST-ZIP	JACKSONVILLE FL 32224			1.4 CITY-S	1-2	ZIP		
TITLE	D .		L DELETE	2.1 TITLE			Ļ	_ Change Addition
NAME	LAWRENCE, ROBERT W			2.2 NAME			eg i	
STREET ADDRESS	1941 DEAN RD			2.3 STREE				
CITY-ST-ZIP	JACKSONVILLE FL 32216			2.4 CITY-S	_	ZiP		
TITLE			DELETE	3.1 TITLE			L	_] Change [] Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE				
CITY-\$T-ZIP				3.4 CITY-S 4.1 TITLE	3T-2	ZIP		<u> </u>
			☐ DELETE				L	Change Addition
NAME				4.2 NAME		4.Php.544		
STREET ADDRESS				4.3 STREE				
CITY-ST-ZIP				4.4 CITY-S 5.1 TITLE	i [∙Z	ZIP		7
TITLE			DELETE				L	
NAME	}			5.2 NAME				
STREET ADDRESS				5.3 STREE				
CITY-ST-ZIP				5.4 CITY-S	3T-7	ZIP		
TITLE			DELETE	6.1 TITLE			gang gang gang gang gang gang gang gang	Change Addition
NAME				6.2 NAME			400002612 で -08/11/9801045 0 :	
STREET ADDRESS				63 STREE	ΤA	ADDRESS	~U6/11/35~~U1U45~~ U 1	15 8-7
CITY-ST. 7ID				6.4 CITY-S	эт. 5	7IP	***1S0.00	

14. I 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 foceiver or justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, of one find that my name appears with an address.

SIGNATURE:

ANTIQUE HOUSE 1841 DEAN RD. JACKSONVILLEFL 904-721-0886 To whom it May Concern Q annual Reports Filings Please accept my check for. \$150.00 for annual Reports Filings. I DID NOT L'ECENTE à FIRST 2 Notice & Do Not feel it is fair to have to pay late fee! Regards.