


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

FILED
Jun 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Gandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000090631 (8)

1. Corporation Name
ALMAR APPLIANCE, INC.



Principal Place of Business 2895 WEST SUNRISE BLVD. #110 FORT LAUDERDALE FL 33311	Mailing Address 2895 WEST SUNRISE BLVD. #110 FORT LAUDERDALE FL 33311-5632
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/05/1996		3a. Date of Last Report	
21		26		4. FEI Number 65-0711891		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
23		28					
Zip	Country	Zip	Country				
24	25	29	30				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WILLIAMS, JOHN A 2895 WEST SUNRISE BLVD. #110 FORT LAUDERDALE FL 33311				81 Name Patrick A. Palmer			
				82 Street Address (P.O. Box Number is Not Acceptable) 4400 NW 24th Street			
				83			
				84 City Lauderhill			
				FL 85 Zip Code 33313			

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 *Patrick A. Palmer*

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			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	PVST PALMER, PATRICK A	4400 NW 24TH STREET	LAUDERHILL FL 33313				
				2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	D PALMER, PATRICK A	4400 NW 24TH STREET	LAUDERHILL FL 33313				
				3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
				4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	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, or on an attachment with an address.

SIGNATURE

Patrick A. Palmer

CR2E034 (9/96)