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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham: 4

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000091922 (0)

## FILED May 20 1998 8:00am Secretary of State

ESTATE LIQUIDATORS INC.					
Principal Place of Business Mailing Address					
2881 CLARK ROAD UNIT #1 2881 CLARK ROAD UNIT 8ARASOTA FL 34231 SARASOTA FL 34231		IIT #1	<b>#1</b>		
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal Place of Business 2a. Mailing Address					01/01/1997 4. FEI Number Applied For
21	26			65-07 / 5 2 3 > Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			SR 75 Additional	
22	27				5. Certificate of Status Desired Fee Required
City & State	City & State			Election Campaign Financing \$5.00 May Be	
23         28           Zip         Country         Zip		Country			Trust Fund Contribution Added to Fees
24 25	Zip <b>29</b>	30	пиу		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
9. Name and Address of Curre		1301			10. Name and Address of New Registered Agent
ROCUANT, ALBERT			81	Name	
2881 CLARK ROAD UNIT #1 SARASOTA FL 34231			62	Stroot Add	rope (B.O. Boy Mumber in Not Acceptable)
			02	Sireel Add	ress (P.O. Box Number is Not Acceptable)
			83		
			84	City	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.					
agent I am familiar with, and accept the oblig	ations of, Section 607.0505, I	Florida Stat	ules	3.	·
SIGNATURE Signature, typed or printed name of registered app	The state of the s	OV Best			red when reinstating) DATE
	ID DIRECTORS	13.	ı Ağei	in eignature redoi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PRESIDENT	☐ DELETE	1.1 311	ΓLE		Change Addition
NAME ALBERT ROCKAY)	ALBERT ROCHAN)		1.2 NAME		
STREET ADDRESS 4631 BENKYA Kd.		1.3 ST	1.3 STREET ADDRESS		
CITYST-ZIP SARASOTA, Pl. 34233		1.4 CI	1.4 CITY - ST - ZIP		
TITLE VICK - PRESIDENT:	VICE - PRESIDENT DELETE DELLI DATINAY-LOCUO-T 4631 BENEVA Rd.		2.1 TITLE		Change Addition
NAME WEST EVALLA Rd.	1421 RUNU/A Rd		2.2 NAME		
STREET ADDRESS CITY-ST-ZIP S9-9-50 ta, F1. 3	4233			ADDRESS	
TITLE	DELETE	2. 4 CI 3.1 TIT		iT-ZIP	Change Addition
NAME	L.J DECCIE	3.2 NA			CT Ottailige CT Addition
STREET ADDRESS				ADDRESS	
CITY-ST-ZIP		3.4. C			
TITLE	DELETE	4.1 TIT			☐ Change ☐ Addition
NAME		4. 2 N/	AME		
STREET ADDRESS		4.3 ST	REET A	ADDRESS	
CITY-ST-ZIP		4.4 CI	TY-ST	F-ZIP	
TITLE	☐ DELETE	5.1 TIT	LE		☐ Change ☐ Addition
NAME		5.2 NA	ME		
STREET ADDRESS		5.3 \$1	REET A	ADDRESS	
CITY-ST-ZIP	I briter	5.4 CIT		T-7IP	
TITLE	☐ DELETE	6.1 TtT			Change Addition
NAME OVEREY ADDRESS	,	6.2 NA		1000000	
STREET ADDRESS .				ADDRESS	
City-St-ZiP  14. Thereby certify that the information supplied w	ith this filma Moes not qualify	for the exe			Section 119.07(3)(i), Florida Statutes. I further certify that the information

14. I hereby certify that the information supplied with this filing floes 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 facility or the facility of the corporation or the facility or the facility of the corporation of the facility of the corporation of the corporation

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