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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000104549 (6)

BARGAIN BOXX, INC.

FILED Apr 16 1997 8:00am Secretary of State



Principal Place of Business Mailing Address										
9185 RODEO DRIVE 9185 RODEO DRIVE LAKE WORTH FL 33467-1037										
					3. Date Incorporated or Qualified 3a. Date of Last Report 12/31/1996					
2. Principal P	lace of Business	2a. Mailing A	ddress			· 	4. FEI Number			Applied For
21		26					65-072-4868		1	Not Applicable
Suite Apt		Suite, Apt		à	-		5. Certificate of Status Desired			Additional Required
City & Stat	G	City & Sta	ate				6. Election Campaign Financing			May Be
23 Zin	Country	28 Zip		Cour	ntru.					d to Fees
Ζφ 24	25	29		30	iu y		8. This corporation has liability for int	angible ta Yes 🔲	ax under I No	s. 199.032,
[24]	9. Name and Address of Cu		nt	1301			10. Name and Address of New Regi			
EIM	K, BARBARA				81	Name				
	S RODEO DRIVE					1				
	E WORTH FL 33467		•		82	Street Ac	et Address (P.O. Box Number is Not Acceptable)			
*	L HONINTE SOTO				83					
•				ļ						
				[84	City		EI	85 Zir	p Code
agent i a SIGNATURE	im fairth ar with, and accept the o			8.			orporation submits this statement for the pur ration's board of directors. I hereby accept quired when renslating)	DATE		
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	DRS IN 12
1/ILE			DELETE	1.1 TIT	LE		PRESIDENT	1	Change	Addition
NAME				1.2 NA	ME	1	BARBARA FUNK			
STREET ADDRESS				1.3 ST	AEET	ADDRESS	9185 RODEO DRIVE			
C-TY-ST-ZIP	A			1.4 CI		T-ZIP	LAKE WORTH, FL. 33467			W71
THE		L	DELETE	2.1 113	ιE		V. PRESIDENT	L	Change	Addition
NAME				2.2 NA			TAMMY M. ELIA			
STREET ADDRESS						ADDRESS	3510 SUNCREST	ķ.,		
City-St-ZiP			1 priete	2.40		ST-ZIP	LAKE WORTH, FL. 33467		Channe	Addition
THEF		L] DELETE	3 1 TIT		}			Change	, L.J ADOILIO
NAME				3.2 NA						
STREET ADDRESS	•					ADDRESS				
CITY-S1-7IP TITLE			DELETE	3,4. C		ST-ZIP	······································		Change	Addition
NAM(<u>_</u>	2 SECUL	4.1 10 4.2 N					Amily Toronty	- Li radillo
STREET ADDRESS						ADDRESS				
City-St-Zip	(4.3 S1 4.4 CI		- 1				
THIE			DELETE	4.4 CI 5.1 TII		7- £IF			Change	Addition
NAME	•	_		5.2 NA						
STREET ADDRESS						ADDRESS				
CiTy-\$1-72				5.4 CI						
TITLE			DELETE	6.1 TIT					Change	e Addition
NAME				6.2 NA		[•	
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP	1			6.4 CI	IY-S	T-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.