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FILED

Apr 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000002811 (2)  
1. Corporation Name  
PRODUCT LIQUIDATORS SALES CORPORATION

Principal Place of Business  
1865 S OCEAN DR #198  
HALLANDALE FL 33009

Mailing Address  
1865 S OCEAN DR #198  
HALLANDALE FL 33009



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 13406 LA PLACE circle  
Suite, Apt. #, etc. # 147  
22 City & State TAMPA FL  
23 Zip 33612 Country USA  
24  
25  
26 13406 LA PLACE circle  
Suite, Apt. #, etc. # 147  
27 City & State TAMPA FL  
28 Zip 33612 Country USA  
29  
30

3. Date Incorporated or Qualified

01/06/1997

4. FEI Number

65-0715422

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

RUBEN, KENNETH  
1865 S OCEAN DR #198  
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name RUBEN, KENNETH  
82 Street Address (P.O. Box Number is Not Acceptable)  
13406 LA PLACE circle  
83 # 147  
84 City TAMPA FL 85 Zip Code 33612

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

Kenneth Ruben

KENNETH RUBEN

President

4/1/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DPS  
RUBEN, KENNETH  
1865 S OCEAN DR #198  
HALLANDALE FL 33009

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

DPS  
RUBEN, KENNETH  
13406 LA PLACE circle # 147  
TAMPA FL 33612

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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:

Kenneth Ruben

President

KENNETH RUBEN 4/1/98 8:17:10

CR2E034 (10/97)