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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000026118 (4)

RIVERVIEW APPLIANCE CENTER INC.

Principal Place of Business

Mailing Address

FILED Apr 13 1998 8:00am Secretary of State



10915 EAST BAY ROAD GIBSON FL 33534		10915 EAST BAY ROAD GIBSON FL 33534		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				03/24/1997	
2. Principal Pla 21 6657	ace of Business U.S. 301 South	26. Mailing Address 26. P.O. Bex	1008	4. FEI Number 59-3435122	Applied For Not Applicable
Sulte, Apt. 4	V, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Cipus State 23 RIVORVIEW		City Pstate 28 PIVER VIGW		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
كار 33 Zip 24	7 1001	29 33568 3C	Country	This corporation owes or has paid the c Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent			81 Name	10. Name and Address of New Registered	d Agent
BABIK, CHRISTOPHER J				DOUGLAS P. VALINE	
10915 EAST BAY ROAD GIBSON FL 33534				Address (P.O. Box Number is Not Acceptable)	
83					
			64 City	RIVERUIEW F	L 85 Zio Code
11. Pursuant to the provisions of Sociions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
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 Signature, typed privated name of registered agent and title if applicable (NOTE. Rejustered Agent signature required when reinstating) DATE DATE					
	Signature, typed shinted name of registered agri-				
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	BABIK, CHRISTOPHER J	A bellen	1.2 NAME	Karans Danger & P.	
STREET ADDRESS	10915 EAST BAY ROAD		1.3 STREET ADDRESS	VALONE, DougLAS P. 10251 Cowley Rd. RIVERVIEW, FL. 33.	
CITY-ST-ZIP	GIBSON FL 33534		1.4 CITY - ST - ZIP	RIVERVIEW FL. 33.	525
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3 4. CITY-ST-ZIP		Change Addition
TITLE		- Dettere	4.1 TITLE		
HAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-2IP		
TITLE	, 3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	andly that the information augmined w	th this filing done not qualify for		ed in Section 119 07(3)(i) Florida Statutes I further	certify that the information

rinder by commentaring information supplied with this little information in decided 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.