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

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE

Sandrø B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000040279 (6) DOCUMENT #

DAMARK INDUSTRIES, INC.

FILED Apr 01 1998 8:00am Secretary of State

Principal Place of Business Mailing Address P.O. BOX 862 P.O. BOX 862 **BUTLER PA 16003 BUTLER PA 16003** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/06/1997 2. Principal Place of Business 4. FEI Number 2a, Mailing Address Applied For 59-3452451 4901 South 30th Avenue 4901 South 30th Avenue Not Applicable Surte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \boxtimes 5. Certificate of Status Desired Fee Required 22 27 6. Election Campaign Financing City & State City & State \$5.00 May Be 23 Tampa, FL Tampa, FL Trust Fund Contribution Added to Fees Country Zip Zφ 8. This corporation owes or has paid the current year Intangible 33619 33619 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Name 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 63 84 Zip Code City 85 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 registored 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, typed or printed name of ingestiered agent and rate if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE President: NAME 1.2 NAME David C. Fenton 4901 South 30th Avenue Tampa, FL 33619 STREET ADDRESS 1.3 STREET ADORESS Tampa, FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change **X** Addition TITLE 21 TITLE Vice President NAME 2.2 NAME Mark McLeod STREET ADDRESS 2.3 STREET ADDRESS 4901 South 30th Avenue CITY-ST-ZIP 2. 4 CITY - ST - ZIP Tampa, FL 33619 DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CiTY-ST-ZiP DELETE Addition Change TITLE 41 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIF

14. Thereby 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 1, it charged, or on an attachment with an address.

SIGNATURE:

3/12/98

813-248-8800