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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B#Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 19 1998 8:00am Secretary of State

P97000064222 (7) DOCUMENT # **BOX-A-MILLION NO. 1 CORP.** Principal Place of Business Mailing Address 1701 A-1-A #220 1701 A-1-A #220 VERO BEACH FL 32963 VERO BEACH FL 32963 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1997 2. Principal Place of Business 2a. Mailing Address Applied For 03127 26 Not Applicable Suite, Apt #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HATCH, IRA C 1701 A-1-A #220 82 Street Address (P.O. Box Number is Not Acceptable) **VERO BEACH FL 32963** В3 Zip Code 84 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 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, typod or printed name of regulated agent and the diapplicable. (NOTE: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE Merryl Bernstein NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 2637 E. Atlantic Blyd. Pompano Beach, FL 33062 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE VP/D Bruce Bernstein NAME 2637 E. Atlantic Blvd. STREET ADDRESS 2.3 STREET ADDRESS Pompano Beach, FL 33062 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7IP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

14. Thereby certify that the information supplied with this filling 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 supplied that annual report is true and occurred and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the comoration in the composition of the comoration for the composition of the

CIONATURE.

1/10/90