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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morniam *

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000076578 (8)

SELLERS ONLY, INC.

Principal Place of Business

Mailing Address

FILED May 19 1998 8:00am Secretary of State



1325 S CONG SUITE 104		1325 S CONGRESS AVE SUITE 104				DO NOT WRITE IN THIS SPACE		
BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426			26					
					 Date Incorporated or Qualified 09/04/1997 	_	_	
	ace of Business	2a. Mailing Address			4. FEI Number	∠ Ar	plied For	
21 9108	CHRYSANTHÉMUM DR.	26 PO BOX 4	27/			No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re		
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23 BOYNT	ON BEACH FL. Country	28 BOYNTON BEAG	CH F	-1	Trust Fund Contribution	Added t	to Fees	
	Country	λ _p	Country	·	8. This corporation owes or has paid t			
24 3343	25 PALM BEACH 9. Name and Address of Current	29 33929-42/13	30 PAL	M 130	CH Personal Property Tax due June 30] No	
		Hegistered Agent	81			tered Agent		
	THEWS, GEORGE W III,ESQ		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Ivanie				
1325 \$ CONGRESS AVE SUITE 104				82 Street Address (P.O. Box Number is Not Acceptable)				
ВО	YNTON BEACH FL 33426		83					
	•		84	City		FL 85 Zip (Code	
11. Pursuant to office or re	to the provisions of Sections 607 0502 egistered agent, or both, in the State of	and 607,1508, Florida Statutes I florida, Such change was au	s, the abov uthorized b	e-named y the cor	d corporation submits this statement for the purp poration's board of directors. I hereby accept the	ose of changing it re appointment as	s registered registered	
agent fai	m familiar with, are accept the obligation	(As.of, Seovices 607:0505, Flore	ida Statute	S.	ŻJ	15/60	1	
SIGNATURE	Signature, type dior printed name of region to Lagorit	ANOTE TO A PROTECT OF THE PROTECT OF	Ungulared As	ot a calabar	e required when reinstating)	/// 78 DATE		
12.	OF FICERS AND		13.	an signatur	ADDITIONS/CHANGES TO OFFICER		RS IN 12	
TITLE	PTD	DELETE	1.1 TITLE		OTO	X Change	Addition	
NAME	MATTHEWS, GEORGE III	• •	1.2 NAME		DICHADO T WALL		00	
STREET ADDRESS	1325 S CONGRESS AVE, STE	104	1.3 STREET	ADDRESS	Po 00x 4374 9108 CHRYSA	NTHEMUM	UK.	
CITY-ST-ZIP	BOYNTON BEACH FL 33426		1.4 CITY-5	ST - ZIP	BOYNTON BEACH, FL 33	424-427	+33437	
TITLE	DELETE					Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS			23 STREET	ADDRESS				
CITY - ST - ZIP			2. 4 CITY-	ST - ZIP				
TITLE	DELETE 3.1					Change	☐ Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY -	ST-ZIP				
TITLE		☐ DEL e te	4.1 TITLE			☐ Change	☐ Addition	
NAME	•		4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY - ST - ZIP			4.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	51 THILE		1	Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET				ļ	
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP				
TITLE	•	☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			63STREET	ADDRESS				
CITY-ST-7/P			64 CITY - 9	7 710	Í			

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.

4/0/08