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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000083968 (2)

THE LIQUIDATION STATION, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					i indilitati ing sasis sadis datis datis datis datis datis sasis rais sasis sasi
	ELLITE BOULEVARD	11423 SATELLITE BOULE	EVARD		
ORLANDO	FL 32637	OHLANDO FL 32837	ORLANDO FL 32837		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
6 Delegational	Diago of Dunings	2a. Mailing Address			09/26/1997 4. FEI Number Applied For
2. Principal 21 34	Place of Business	26. Mailing Address	1		59 - 3469888 Not Applicable
Suite, Ap		Suite, Apl. #, etc.			S8.75 Additional
22		27	· 		5. Certificate of Status Desired Fee Required
City & State		City & State			Election Campaign Financing \$5.00 May Be
Zip	Country	Zip	Countr	<u> </u>	Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
24	25	29	30	,	Personal Property Tax due June 30. Yes No
24 (9. Name and Address of Cur				10. Name and Address of New Registered Agent
EOUSE, GEORGE A				Name	
11423 SATELLITE BOULEVARD			82	Street A	Address (P.O. Box Number is Not Acceptable)
(Orlando fl 32837				
			83	'	
			84	City	FL 85 Zip Code
dd Dynayan	at to the provisions of Castions FO7.	0502 and 607 1509. Florida Ctatut	or the abov	io named	
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.					
•		oligations of, section 607.0505, Fic	JIICA SIAICIE	35.	
SIGNATURE	Stgriature, typed or printed name of registered	Fagent and titic if applicable (NOT	E: Registered Ap	jent signature	required when reinstating) DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETÉ	1.1 TITLE		Change Addition
NAME	EOUSE, GEORGE A	WARR	1.2 NAME		
STREET ADDRESS		VARU		T ADDRESS	
CITY-ST-ZIP TITLE	ORLANDO FL 32837	DELETE	1.4 CITY- 2.1 TITLE	ST-ZIP	Change Addition
NAME			2.2 NAME		
STREET ADDRESS	AAAAA AATELLITE BOLILE	VARD		1 ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32837		2. 4 CITY		
TITLE	DELETE 3.11		3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	s		3.3 STREE	T ADDRESS	
CITY-ST-ZIP		Driete	3.4. CITY	- ST- ZIP	Change Addition
TITLE		☐ DELETE	4.1 TITLE		L. Grange L. Abbalon
NAME			4. 2 NAM		
STREET ADDRESS	3		4.3 STREE	T ADDRESS	
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	G1- EH	Change Addition
NAME			5.2 NAME		
STREET ADDRESS	s		5 3 STREE	T ADDRESS	
CITY-ST-ZIP	<u></u>		5 4 CITY	ST-ZIP	
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	s			T ADDRESS	
CITY-ST-ZIP	. and the that the information of the Co	d with this files does not qualify 4	6.4 CITY	ST-ZIP	ord in Section 119.07(3)(i) Florida Statutes. I further certify that the information
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 suppliemental 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 attachment with an address.					