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

PROFIT **CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

11 000,000,000	SON'S HARDWARE, INC.	UU93314 (<i>1</i>)		 	
Principal Plac	e of Business	Mailing Address	Mailing Address			AND BRID IDION INDA 14100 11814 DISH 4061
621-A CHENEY HWY. TITUSVILLE FL 32780		621-A CHENEY HWY.	621-A CHENEY HWY. TITUSVILLE FL 32780			
· · · · · · · · · · · · · · · · · · ·		THE STREET IS OFFICE				TE IN THIS SPACE
i 					3. Date Incorporated or Qualified 10/29/1997	
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					59-347 2980	Not Applicable
Suite, Apt.	#, elc.	Suite, Ant. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		+======================================	
23	,	28	~ ~		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	lry	8. This corporation owes or has p	
24	25	29	30		Personal Property Tax due Jur	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New F	legistered Agent
	er, teresa		\ `	31 Name		
621-A CHENEY HWY.			}	Street .	dress (P.O. Box Number is Not Accepta	able)
TITL	JSVILLE FL 32780		}_			·
			(1	33		(
' 			ti	4 City		85 Zip Code
44 5		00 002 I/ 00 El			poration submits this statement for the	FL 8 2.0 Code
office or re agent. La	eg ister ed agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change wa gations of, Section 607.0505,	is authorized Florida Statu	by the corp tes.	ation's board of directors. I hereby acc	ept the appointment as registered
12.	Signature, typical or printed name of registered as OFFICERS At	gent and title it applicable. (N ND DIRECTORS	IOTE: Registered	Agent signature	ired when reinstating) ADDITIONS/CHANGES TO OFF	DATE
TITLE	DP	DELETE	1.1 101	F	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	Timber States !		1.2 NAN			(-
STREET ADDRESS	3165 LIONEL ROAD		1.3 STREET ADDRESS			1
CITY-ST-7IP	MIMS FL 32754		•	- ST - 71P		}
TITLE			2.1 TITL	E '		Change Addition
NAME {	RIDER, MICHAEL		2 2 NA N	ıt İ		ĺ
STREET ADDRESS	3165 LIONEL ROAD		2.3 STR	EET ADDRESS		[
CITY+ST-ZIP	MIMS FL 32754		2 4 CIT	Y-ST-ZIP		}
TITLE	DST	DELETE	3.1 TITL	E		Change Addition
NAME)	NANKIVIL, DAVID		3.2 NAN	IE .		1
STREET ADDRESS	3860 BARCELONA ST.		3.3 STR	E1 ADDRESS		(
CITY-ST-ZIP	TITUSVILLE FL 32796	T Section		(-ST-ZIP		
TITLE		☐ DELETE	4.1 TITL			L. Change L. Addition
NAME			4 2 NA			1
STREET ADDRESS CITY - ST - ZIP				E1 ADORESS		}
TITLE				- \$1 - ZIP		Change Addition
NAME			5.1 MAN	ĺ		E. Shorge E. Modition
STREET ADDRESS				EFT ADORESS		[
CITY-ST-71P				- ST - ZIP		· ·
TITLE		DELETE	6.1 Till		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			6.2 NAM	f		
CIRCET ADDRESS			C 2 CTO	TT 4500100		1

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 employment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with a) address

SIGNATURE:

\$ 3/30/98 2646258

FILED

Apr 03 1998 8:00am

Secretary of State