

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 07, 1999 8:00 am  
Secretary of State

05-07-1999 90052 050 \*\*\*150.00

DOCUMENT # P98000067462

1. Corporation Name

PERFORMANCE WAREHOUSE CLUB, INC.

Principal Place of Business

3817 TURTLE RUN BLVD. #2724  
CORAL SPRINGS FL 33067

Mailing Address

3817 TURTLE RUN BLVD. #2724  
CORAL SPRINGS FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1998

4. FEI Number

65-0857641

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 141 NW 20TH ST. G-128

Suite, Apt. #, etc.

22 SUITE G-128

City & State

23 BOCA RATON, FL

Zip

24 33431

Country

25 U.S.A.

2a. Mailing Address

26 141 N.W. 20TH

Suite, Apt. #, etc.

27 SUITE G-128

City & State

28 BOCA RATON, FL

Zip

29 33431

Country

30 USA

9. Name and Address of Current Registered Agent

POLONSKY, MARTIN  
1289 CAMINO REAL  
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

MARTIN POLONSKY APRIL 29, 99

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME IRVINE, DAVID  
STREET ADDRESS 3817 TURTLE RUN BLVD. #2724  
CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE VP ☒ DELETE

NAME IRVINE, ROBERT  
STREET ADDRESS 586 NW 47TH AVE.  
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE S ☒ DELETE

NAME DITAMORE, GREG  
STREET ADDRESS 1755 LINTON LAKE RD APT. E  
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE T ☐ DELETE

NAME POLONSKY, MARTIN  
STREET ADDRESS 1289 W. CAMINO REAL  
CITY-ST-ZIP BOCA RATON FL 33486

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(561) 447-9444

CR2E034 (11/98)

