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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

S78482

SIGNATURE:

(4)

1. Corporation Name  MIAMI LIQUIDATION SERVICES INC.  Principal Place of Business  9500 NW 79 AVE. #8  HALEAH GARDENS FL 33016  Maiting Address  9500 NW 79 AVE. #8  HALEAH GARDENS FL 33016							
		The Control of the Co	12 23510		3. Date incorporated or Qualified 09/04/1991	3a. Date of Lat 04/25	st Report 5/1995
Principal Place of Business 2a. Mailing Address 26					4. FEI Number	Applied For	
Suite, Apt.		26	A		65-0280257		Not Applicable
XXX	π, c.ω.	27	my	/	5. Certificate of Status Desired	11 '	.75 Additional ee Required
Criv & State	GALVENS	City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip J30	Country SA	29 323016	Coun	ŬSA	B. This corporation has liability for Florida Statutes ☐ Yes		ers 199.032,
	9. Name and Address of Currer		1901		10. Name and Address of New F		
			٤	1 Name			<del></del>
GOMBERG, LEON				2 Street Add	ress (P.O. Box Number is Not Acceptable)		
	W 79 AVE. #8						
HIALEA	AH GARDENS FL 33016		8	3			
			8	4 City		E1 85	Zip Code
<ul> <li>Pursuant t or register</li> </ul>	to the provisions of Sections 607,0502 red agent, or both, in the State of Flori	2 and 607.1508, Florida Statu da. Such change was authori:	tes, the above	named corporporation's boa	oration submits this statement for the purard of directors. I hereby accept the app	rpose of changing pointment as registe	ered agent. Lam
or register familiar wit	red agent, or both, in the State of Flori th, and accept the obligations of, Sect Signature, typed or printed name of registered agent	da. Such change was authori, ion 607.0505, Florida Statute:	zed by the co s. OTE: Registered A	named corporporation's boar	ard of directors, I hereby accept the appared when reinstating)	DATE	ered agent. I am
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