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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V28483

(8)

BUY-THE-SQUARE-YARD INC.

FILED
May 12 1998 8:00am
Secretary of State



Principal Place of Pressure					B/6ft 210tt 010tt 010tt 100t
Principal Place of Business Mailing Address					
2501 BRISTOL DR. 2501 BRISTOL DR. STE. 138 STE. 138					
W. PALM BCH. FL 33409		STE. 13B W. Palm BCH. Fl. 33409		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	
				04/09/1992	
2. Principal F	lace of Business	2a. Mailing Address	- 18.1 - 1.1	4. FEI Number	Applied For
21		26		65-0310658	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	rent year Intangible
24	25	29 34	0		Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent					Agent
WHALEN, TIMOTHY L ESQ.			81 Name		
301 CLEMATIS ST. STE. 200			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
W. PALM BCH. FL 33401			, , , , , , , , , , , , , , , , , , , ,		
			63		
			84 City		GE 7in Code
			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 trie if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D	☐ DELETE	1.1 TITLE	BAYLE W. Harper	Change A Addition
NAME	HAYGOOD, JACKIE	ŀ	1.2 NAME	155 40th 56.	
STREET ADDRESS	1300 39TH 3T	ļ	1.3 STREET ADDRESS	155 PAPTA SE. W. PALM BEACK, FL	33407
CITY-ST-ZIP	W-PALM-BEACH FL.		1.4 CITY - ST - ZIP	sected ary	
TITLE	• P	☐ DELETE	2.1 TITLE	Bradley G. Harper	Change Addition
NAME	HAPPER, TAMES II	ļ	2.2 NAME	1551 PALM BEACH, FL	0 = 13 = 1
STREET ADDRESS	1567-10TM-37	ļ	2.3 STREET ADDRESS	iw. PALM BEACH, 12	33407
CITY-ST-ZIP	W. PALM BEACH PL 33407		2. 4 CITY - ST - ZIP	Treasurer	
TITLE		☐ DELETE	3.1 TITLE	James H. Hansen	Change
NAME		l	3.2 NAME	ICCI MUH ST	
STREET ADDRESS		l	3.3 STREET ADDRESS	JAMES H. Hanper 1551 40th St. pwest Palm Beach, Fl	L 33407
CITY-ST-ZIP			3.4. CITY-ST-ZIP	President	•
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		l	4. 2 NAME		1
STREET ADORESS		l	4.3 STREET ADDRESS		
CITY-ST-ZIP		1	4.4 CITY-ST-ZIP		· '
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		-
STREET ADDRESS		!	5.3 STREET ADDRESS		
CITY-ST-ZIP		İ	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME		-	6.2 NAME		
STREET ADDRESS		†	6.3 STREET ADDRESS		}
CITY-ST-ZIP		,	64 CITY-ST-ZIP		
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14. I nereby 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 informatio 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 withy an address.

SIGNATURE:

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4/29/91

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