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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

Principal Place of Business

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

Mailing Address

ABC APPLIANCE & TV. INC.

**FILED** 

Apr 28 1998 8:00am

Secretary of State

5143 COMMERCIAL WAY SPRING HILL FL 34606		5143 COMMERCIAL WAY Spring Hill Fl <b>3480</b> 6					
					DO NOT WRITE IN THI:  3. Date Incorporated or Qualified  08/26/1992	SSPACE	
9 Oringinal Pi	nea of Pupinger	2a. Mailing Address			4. FEI Number		oplied For
2. Principal Place of Business		26		59-3138901	<del></del>	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
22 Oft 8 Crate		27		5. Certificate of Status Desired	Certificate of Status Desired		
City & State		City & State		Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added	to Fees	
Zip	Country	<b>Z</b> ip	Country		8. This corporation owes or has paid the o		
24	25	29	30		Personal Property Tax due June 30.		.] No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent	
KIF	RZYNSKI, MICHAEL J.		81	Name			
5143 COMMERCIAL WAY			82	Ct-set Ad	Ideas (D.O. Bay Number in Not Acceptable)		
	RING HILL FL 34606		04	Street Ad	dress (P.O. Box Number is Not Acceptable)		I
SPANIS THEET E STOOL			83	1			
			84	City	P=	85 Zip	Code
74 8	- Ale manufalence of Continue 507.050	22 and 607 1609 Florida Statut	loc the abou	o named co			ts registered
office or re	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was jations of, Section 607.0505, Fl	authorized b orida Statute	y the corpores.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	ppointment as	registered
SIGNATURE	Signature typed or printed name of registered ag	est and title if purchashle INO	F Registered Ar	iont signature rec	quired when reinstating) DATE	<del> </del>	
12. OFFICERS AN				ion dignatoro ro	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	DPTS	DELETE	1.1 TITLE			Change	Addition
NAME	KIERZYNSKI, MICHAEL J.		1.2 NAME				ł
	TALE COLUMNICACION WAY			1 ADDRESS			
STREET ADDRESS	SPRING HILL FL						
CITY-ST-ZIP			1.4 CITY -	ST-ZIP		Change	Addition
TITLE	2.5		2.1 TITLE			Grange	
NAME	KIERZYNSKI, GLORIA H		2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	SPRINGHILLE FL		2. 4 CiTY				1021 A 4 801
TITLE	VP	X DELETE	3.1 TITLE		2ND VP	Change	X Addition
NAME	Paulsen, David		3.2 NAME		FITZGERALD, WILLIAM P.		
STREET ADDRESS	5155 COMMERCIAL WAY		3.3 STREE		5143 COMMERCIAL WAY		
CITY-ST-ZIP	SPRINGHILL FL		3.4. CITY	ST-ZIP	SPRING HILL, FL 34606		
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	:			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change	Addition .
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
			5.4 CITY-	· · · · · · · · · · · · · · · · · · ·			
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	01-511		Change	Addition
			6.2 NAME	1			
NAME			0.2 NAME	1			

14. 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

(352) 596-3278