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

Mailing Address

P.O. BOX 15406

ST PETERSBURG FL 33733-5406

**PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (2)HARRY H. BELL & SONS, INC.

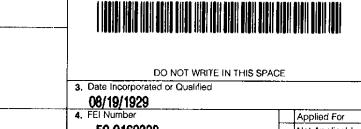
Principal Place of Business

ST PETERBURG FL 33712

756 28TH ST S

STREET ADDRESS

## **FILED** May 05 1998 8:00am Secretary of State



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2. Principal Place of Business				L	2a. Mailing Address						4, FEI Number				Appl	ied For
21				2	26						59-0160328	}			Not /	Applicable
<u> </u>	Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Stat	ue Decired		\$8.7	<b>5</b> Ad	ditional
22					27						5. Certificate of Stat	us Desireo		Fee	Requ	ulred
Щ	City & State				City & State						6. Election Campaig	gn Financing		\$5.0	00 м	ay Be
23				2	28						Trust Fund Contro	ibution			ed to	
L	Zip		Country	ļ	Zip ~₁		ٰٰٰٰٰٰٰ لِــٰٰٰ	Country	Í		8. This corporation	owes or has pa	id the cur	rent year	Intan	gible
24			25	2			30				Personal Property			X Yes		No
g. Name and Address of Current Registered Agent								81	,		10. Name and Addre	ess of New Re	gistered .	Agent		·
BELL ROBERT P									1	Vame						
641 64TH AVE								82	-	Street Addre	ess (P.O. Box Number in	e Not Acceptat	la)			
ST PETERSBURG BCH FL 33706								Ι`	JUGOT MALITE	555 (F.O. DOX HUMBEL II	s not Acceptat	110)				
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]								84	١,	City			FL	<b>85</b> 2	ip Co	de
11	1. Pursuant	to the provis	ions of Sections	607.0502 and	1 607, 1508	3. Florida Statut	tes. th	e abov	L e-n	amed corpo	oration submits this stat	ement for the n		changin	n its i	enistered
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														gistered		
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.														i		
SIGNATURE Signature, typed or printed name of registered agent and title it applicable: (NOTE, Registered A													D.11.			
12	<del></del>	Oignation (1)200		ERS AND DIF		m: (M/1)		13.	UI11 S	ignatora redoire	ADDITIONS/CHAN	ICES TO OFFIC	DATE	DIDECT	ODC	IN 10
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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 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