FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

HOBELMANN, INC.



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

1996
DOCUMENT #

378540

(9)

FILED Feb 02 1996 8:00 am Secretary of State



3. Date Incorporated or Qualified 3a. Date of Last Report

Principal Place of Business	Mailing Address
1740-21 STREET NORTH ST PETERSBURG FL 33713	1740-21 STREET NORTH ST PETERSBURG FL 33713

					03/10/1971	0x	3/21/19	95		
			Maling Address				4. FEI Number		[]	Applied For
[21]		26	,				59-1324183			Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		•	5 Additional
City & State		27	City & State							Required
23	c.	28	City & State				6. Election Campaign Financing			May Be
Z _I p	Country	20	Zip	Cour	ntry.		Trust Fund Contribution			ed to Fees
24	25	29	. 42	30	, c y		 This corporation has liability for it Florida Statutes Yes 		ix under s	199.032,
	g. Name and Address of Currer	4551	tered Agent	- 1001			10. Name and Address of New R		Agent	
					81	Name		- 3 .0.0.0	Ago.n.	
HOBELA	MANN, STEPHEN									
1740-21 STREET NORTH					82 Street Address (P.O. Box Number is Not Acceptable)					
l	ERSBURG FL 33713			ŀ	83					
					\perp					
					84	City		Ei	85 Z	ip Code
11. Pursuant	to the provisions of Sections 607,0502	2 and 60	7.1508. Florida Statu	tes, the abov		amed coroo	oration submits this statement for the purp	nose of chi	noina ite	registered office
UL register	red agent, or both, in the State of Flori ith, and accept the obligations of, Sect	ua. Sucri	i change was authori	zea by the co	orpo	oration's boa	ard of directors. I hereby accept the appo	intment as	registered	d agent. I am
	ior, and accept the obligations of, sect	. (100 1:00)	oodo, Florida Statute:	S.						
SIGNATURE	Signature: typed or printed name of registered agent	Land the Ka	applicacie (N	OTE Registered /	Apent	t signature regiliri	ed when reinstating)	DATE		
12.	OFFICERS AN	D DIREC		13.			ADDITIONS/CHANGES TO OFFI		DIRECTO	DRS IN 12
TI'LE	PD		DELETÉ	1 1 111	LF				Change	☐ Addition
NAME	HOBELMANN,STEPHEN			1.2 NAI	ME					
STREET ADDRESS	1740-21 STREET NORTH			1351	1336	ADDRESS				
C IY-SI-ZP	ST. PETERSBURG FL			14 CIT	Y - \$1	1 - ZIP				
1.11.1	TS		DELETE	2 1 BI	LE			[Change	Addition
NAME	HOBELMANN, STEPHEN			2 2 NA	ME					
STREET ADDRESS	1740-21 STREET NORTH			23 STF	REFT.	ADDRESS				
City-S1-Zie	ST.PETERSBURG FL		· · · · · · · · · · · · · · · · · · ·	2 4 CIT	Y - S1	I - ZiP				
TillE	VPD		DELETE	3 1 111	LE			Ε	Change	☐ Addition
NAME	HOBELMANN, CAROLE			3.2 NAI	ME					
STREET ADDRESS	1740-21 STREET NORTH			33 SI	REE I	ADDRESS				
CHY-ST ZIP	ST. PETERSBURG FL			3 4 CIT		I - ZIP			,	
1/11/6			DELE TE	4. 1 111				C	Change	Addition
NAME				4.2 NAI						
STREET ADDRESS				4.3 STF	REET.	ADDRESS				
CITY ST-ZIP	ļ		F7 65 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	4 4 01		1 - ZeP				4 <u></u>
`IIL;			☐ DELETE	5 1 Til				[] Change	■ Addition
NAME				5.2 NA						
STREET ADDRESS						ADDRESS				
CHY-S1-ZIP			FIRE	5 4 C(T		I-ZIP				
TITLE			DELETE	6 1 TH					"] Change	■ Addition
NAME				6 2 NAI						
SPREEL ADDRESS						ADDRESS				
C-1Y ST ZIP	1			5.40.0	V C1	1.70				

14. I do hereby certify that the improbation supplied with this file), is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information in file sted on this annual report is done hereby ental 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 on bector of the corporation, their desired of 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 ctrifliged, or on an accuracy with an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

295AN96 (813)821-6043