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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 1

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

431950

(5)

HAMMONDS & BECK ENTERPRISES, INC.

**FILED** Jun 01 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address                                       |  |                                |                                   |   | 1161) (1611 \$1611 \$1611 6151 1661                                 |  |
|---|--|--------------------------------|-----------------------------------|---|---|--|
| 8046-A PRESIDENTS DRIVE 8046-A PRESIDENTS DRIVE ORLANDO FL 32809 ORLANDO FL 32809 |  |                                | Æ                                 |   |   |  |
|   |  |                                |                                   |   | E IN THIS SPACE   |  |
|   |  |                                |                                   | 3. Date Incorporated or Qualified   |   |  |
|   |  | 1.2                            |                                   | 08/06/1973  |   |  |
|   | Place of Business  | 2a, Mailing Address            |                                   | 4. FEI Number   | Applied For   |  |
| Suite, Apt.   | # alo  | Suite, Apt. #, etc.            |                                   | 59-1501745  | Not Applicable  |  |
| 22  | #, <b>6</b> (C.  | <b>-</b>                       |                                   | 5. Certificate of Status Desired  | \$8.75 Additional Fee Required                                      |  |
| City & State  | е  | City & State                   | <del> </del>                      | 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 pa  |   |  |
| 24  | 25   | 29                             | 30                                | Personal Property Tax due June  | <b>N</b> ' 1  |  |
|   | g. Name and Address of Current R   | legistered Agent               |                                   | 10. Name and Address of New Re  | egistered Agent   |  |
| HA  | MMONDS, JAMES E  |                                | 81 Name                           | "ANNANDA DEBARAM  |   |  |
| 444 ABDING LIVE TERRIOR   |  |                                |                                   | HAMMONDS, DEBORAH   | nle)  |  |
| OCOEE FL 34761  |  |                                | Jiedi A                           | 82 Street Address (P.O. Box Number is Not Acceptable) 8046 PRESIDENTS DRIVE           |   |  |
|   |  |                                | 83                                | <u> </u>  |   |  |
|   |  |                                | 84 City                           | <del></del>   | lee Zio Codo  |  |
|   |  |                                | 84 City                           | ORLANDO   | FL   85   Zip Code   32809  |  |
| office or r   | to the provisions of Sections 607,0502 a<br>registored agent, or both, in the State of<br>im familiar with, and accept the obligatio | Florida: Such change was a     | authoriz <b>i</b> (d by the corpo | orporation submits this statement for the pration's board of directors. I hereby acce | ourpose of changing its registered pt the appointment as registered |  |
| SIGNATURE   | Deborah Hammond  |                                | Hearthreed Agent signature re     | Nammondo April 16   | , 1998  |  |
| 12.   | OFFICERS AND L   | DIRECTORS .                    | 13.                               | ADDITIONS/CHANGES TO OFFI   | CERS AND DIRECTORS IN 12  |  |
| TITLE   | D  | DELE TE                        | 1.1 TITLE                         |   | Change Addition   |  |
| NAME  | HAMMONDS, JAMES E  | •                              | 1.2 NAME                          |   |   |  |
| STREET ADDRESS  | 1441 SPRING LAKE TERRACE   |                                | 1.3 STREET ADDRESS                |   | -   |  |
| CITY-ST-ZIP   | OCOEE FL   |                                | 1.4 CiTY - \$1 - ZIP              |   |   |  |
| TITLE   | PST  | ☐ DELETE                       | 21 TITLE                          | DPST  | Change Addition   |  |
| NAME  | HAMMONDS, DEBORAH A  |                                | 2.2 NAME                          | HAMMONDS, DEBORAH   | A.  |  |
| STREET ADDRESS  | 1441 SPRING LAKE TERRACE   |                                | 2.3 \$TREE1 ADDRESS               | 1441 SPRING LAKE  |   |  |
| CITY-ST-ZIP   | OCOEE FL   |                                | 2. 4 CITY - ST - ZIP              | OCOEE, FL   |   |  |
| TITLE   | D  | ☐ DELFTE                       | 3.1 TITLE                         | •   | Ctiange Addition  |  |
| NAME  | STANISCH, JEANEMARIE   |                                | 3.2 NAME                          |   |   |  |
| STREET ADDRESS  | 8046A PRESIDENTS DR  |                                | 3.3 STREET ADDRESS                |   | l   |  |
| CITY-ST-ZIP   | ORLANDO FL   |                                | 3.4. CHY - \$1 - ZIP              |   |   |  |
| TITLE   |  | ☐ DELETÉ                       | 4.1 TITLE                         |   | Change Addition   |  |
| NAME  |  |                                | 4. 2 NAME                         |   | Ì   |  |
| STREET ADDRESS  |  |                                | 4.3 STREET ADDRESS                |   | ļ   |  |
| CITY-ST-ZIP   |  | ···                            | 4.4 CITY - S1 - ZIP               |   |   |  |
| TITLE   |  | ☐ DELETE                       | 5.1 TALE                          |   | Change    Addition  |  |
| NAME  |  |                                | 5.2 NAME                          |   |   |  |
| STREET ADDRESS  |  |                                | 5.3 STREET ADDRESS                |   |   |  |
| CITY-ST-ZIP   |  |                                | 5.4 CITY-S1-ZIP                   |   |   |  |
| TITLE   |  | ☐ DELETE                       | 6.1 TITLE                         |   | Change Addition   |  |
| NAME  |  |                                | 6.2 NAME                          |   | ļ   |  |
| STREET ADDRESS  |  |                                | 6.3 STREET ADDRESS                |   |   |  |
| CITY-ST-ZIP   |  |                                | 6.4 CITY - S1 - 7IP               |   |   |  |
| 44 I heroby o   | portify that the information conviled with   | thus films door not qualify to | y the exemption stated            | in Section 110 07(3)(i) Florida Statutes I  | further certify that the information                                |  |

Indicated on this annual report or supplies with one singular the information indicated on this annual report or supplies that the information indicated on this annual report is 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 of 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 changing or on an attackment with an address.