2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 503399** 1. Entity Name HAVEN SALES, INC. Principal Place of Business Mailing Address POST OFFICE BOX 1491 POST OFFICE BOX 1491 EAGLE LAKE FL 33839 EAGLE LAKE FL 33839

6. Name and Address of Current Registered Agent

3. Mailing Address

City & State

Suite, Apt. #, etc.

2. Principal Place of Business

REEVES, STEVE A.

33880

250 22ND STREET S.W. WINTER HAVEN, FL

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

Suite, Apt. #, etc.

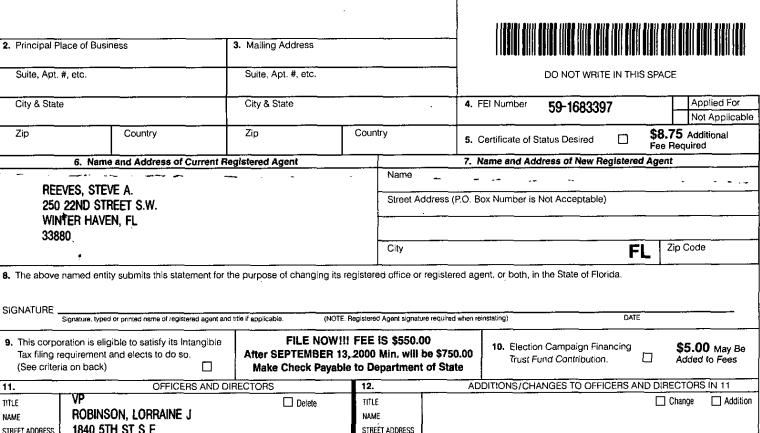
City & State

Zip

SIGNATURE

Sep 15, 2000 8:00 am Secretary of State

09-15-2000 90004 003 ***550.00



(See criteria on back)			Make Check Payable to Department of State		State			
11.	OFFICERS AND DIRE		CTORS	12. AD		DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROBINSON, LORRAINE 1840 5TH ST S E WINTER HAVEN, FL 000		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS (CITY-ST-ZIP	P REEVES, STEVE A 250 22ND ST S W WINTER HAVEN, FL 000	000	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition .
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST REEVES, BECKY-A 250 22ND ST S W WINTER HAVEN, FL 000	000	☐ Delete - ♣ -	TITLENAMESTREET ADDRESSCITY-ST-ZIP	~ ~	.	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	-	☐ Change	Addition

Country

FILE NOW!!! FEE IS \$550.00

After SEPTEMBER 13, 2000 Min, will be \$750.00

City

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with a other like empowered.

SIGNATURE: