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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 546533

(1)

HAUSER COIN & STAMP, INC.

FILED
Feb 20 1997 8:00am
Secretary of State

Principal Prace	e of Business	Mailing Addres	S		1 180010 01111 010				
3425 S. FLORID LAKELAND FL 3 US		LAKELAND FL 33	3425 S FLORIDA AVE LAKELAND FL 33603-4755 US						
					08/12/1977	3. Date Incorporated or Qualified 08/12/1977 3a. Date of Last Report 02/16/1996			
<u> </u>	ace of Business	2a. Mailing Add	ress		4. FEI Number	70		optied For	
21		26			59-18685	18		ot Applicable	
Suite, Apt	#, 610	Suite, Apt #	F _I etc.		5. Certificate of	Status Desired		Additional equired	
City & State	n	City & State			6. Election Cam Trust Fund Co		P-100	May Be to Fees	
7ip	Country 25	Zip 29	30	intry	8. This corporati		intengible tax under s Yes No	199.032,	
241	9. Name and Address of Curre		30			ddress of New Re		*********	
HAU	SER, NICHOLAS P			81 Nam	9				
3425 S. FLORIDA AVE.				82 Stree	t Address (P.O. Box Numb	er is Not Acceptab	ole)		
	ELAND FL 33803				(1.00.000 (1.0. Don 1.00.10			ur. =	
				B3					
				84 City			85 Zip	Code	
	to the provisions of Sections 607 05			<u> </u>			FL T	to reciptored	
office or r agent I a	registried agent, or both, in the Statum familiar with, and accept the obligation of the control	le of Florida. Such cha gations of, Section 607	nge was authorize 7.0505, Florida Sta	d by the co tutes.	orporation's board of direct	ors. I hereby accer	ot the appointment as	registered	
12.		ND DIRECTORS	(NOTE REGISTER)	O When shirt		HANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12	
'the	PD		DELETE 1.11	TLE			Change	Addition	
NAM:	HAUSER, NICHOLAS		1,2 ?	AME					
STREET ADDRESS	3425 S. FLORIDA AVE.		1.3 5	THEET ADDRESS	3				
C-TY - ST - ZIP	LAKELAND, FL 00000		1.4 (ITY-ST-ZIP					
TITLE	STD		DELETE 2.1 T	ITLE			☐ Change	Addition	
NAME	HAUSER, BARBARA		2.21	AME					
STREET ADDRESS	3425 S. FLORIDA AVE.		2.3 9	THEET ADDRESS	5				
C TY - S' - ZIP	LAKELAND FL			CHTY-ST-ZIP			I Chare	Addition	
TITLE		البيا	DELETE 311				Change	L.J Audillon	
1MAM				AME					
STREET ACCRESS				TREET ADDRESS					
CHY ST ZIP		ГТ	3.4. DELETE 4.11	CITY-ST-ZIP			Change	Addition	
NAME		· · · · · ·		NAME			- Chargo		
			*	TREET ADDRES					
STREET ADORESS				TITY - ST - ZIP	,				
DILE				ITLE	 		Change	Addition	
NAME		-	i i	IAME			•		
STREET APORESS				Treet addres	s				

14. I do hereby certify that the information supplied with this filling 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.

5 4 CITY - ST - ZIP

63 STREET ADDRESS 64 CITY - ST - ZIP

61 TITLE

62 NAME

SIGNATURE

301Y-51-26

STREET ADDRESS

TEDLE NAME

Barbara - Hause

Barbara HAT

DELETE

Hauser/secretary

-15-97 (941) 647-2

O/O/ YEUTICAL

Addition