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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 572444

A HANSEL AND GRETEL, INC.

Principal Place	e of Business	Mailing Address							
107 PALMETTO DUNES CIR 107 PALMETTO DUNES CIR									
NAPLES FL 33940 NAPLES FL 33940						DO NOT WE	RITE IN THIS	CDACE	
US		US						3FACE	
	•					3. Date Incorporated or Qualifed	1		Į
						05/19/1978		/	-0-15-
2. Principal Pl	ace of Business	2a. Mailing Address	Mailing Address			4. FEI Number		<u> </u>	pplied For
21		26				59-1931230			ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 / Fee Re	I .
22		27							·
City & State	e '	City & State				6. Election Campaign Financing	, –		May Be
23 28						Trust Fund Contribution		Added 1	to Fees
Zip	Country Zip			Country		8. This corporation owes the cu	rrent year Inta		
24	25 29		30			Personal Property Tax.		☐Yes	□No
	9. Name and Address of Current	Registered Agent		201		10. Name and Address of New	Registered A	gent	
	E HADY O			81	Name				
LITTLE, MARK S.				82	Street Address (P.O. Box Number is Not Acceptable)				
107 PALMETTO CIR					-				
NAP	LES FL 33940			83					ĭ
				0.4	Oit.			85 Zip (Code
				84	City		FL	65 Zip '	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statut	es. the a	above	-named corp	poration submits this statement for th	e purpose of	hanging its	registered
office or r	egistered agent, or both, in the State of	f Florida. Such change was a	uthonze	d by I	tne corporati	on's board of directors. I hereby acc	ept the appoin	tment as re	gistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Fig	noa Sia	tutes.					}
SIGNATURE		- July V Easting (NOTS	Decistors	d Agont	t elegature require	ed when reinstating)	DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg 12. OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO C		D DIRECTO	DRS IN 12
TITLE	PD OFFICERS AIVE	DELETE				Abbittoto.utteze		Change	Addition
	LITTLE, MARK S.			IAME					_
NAME			1						
STREET ADDRESS	107 PALMETTO DUNES CIR				ADDRESS				ļ
CITY-ST-ZIP	NAPLES FL		_	ITY-ST	r-ZiP	····		☐ Change	☐ Addition .
TITLE	☐ DELETE 2.1 T						□ Cuarde		
NAME			2.2	IAME					ľ
STREET ADDRESS			2.3 \$	TREET	ADDRESS				
CITY-ST-ZIP			2.4	CITY-S	T-ZIP		•		
-TITLE	— □ DELETE		3.17	3.1 TITLE -		•		☐ Change	Addition
NAME			3.21	IAME					Į
STREET ADDRESS			3.3 8	TREET	ADDRESS				1
CITY-ST-ZIP			3.4.	CITY-S	T-ZIP				
TITLE		☐ DELETE	_	TLE				Change	Addition
NAME			4.2	NAME					
STREET ADDRESS					ADDRESS				
				XTY-ST					
CITY-ST-ZIP		☐ DELETE		TITLE	1-4F		· ·	Change	Addition
				VAME		,		- :	_
NAME			1		ADDRESS				ĺ
STREET ADDRESS			- 1						
CITY-ST-ZIP		. December		OTY-ST	1-434			☐ Change	☐ Addition
TITLE		☐ DELETE	4					□ change	
NAME			1	NAME					{
STREET ADDRESS			6.3	TREET	ADDRESS				

14. 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 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 is changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90003 020 ***150.00