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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # 611575

(2)

HOUK ENTERPRISES, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

2141 HWY 97 N.

MOLINO FL 32577

ν-

Mailing Address

2141 HWY 97 N.

MOLINO FL 32257

2a. Mailing Address

Suite, Apt. #, etc.

nfrises, inc.

26

FILED
Jan 15 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

Date incorporated or Qualified 03/02/1979

59-1994877

4. FEI Number

22		27	27						5.	Certifica	ite of St	atus Desi	red	Ш		Required		
City & State				City & State						6.	Election	Campa	ion Finan	icina .			May Be	
23			28	28						,	Trust Fu		-				to Fees	
Zip	1	Country	<u> </u>	- ·			untry			8.	This con	poration	owes or	has pa	id the c	urrent year Ir	tangible	
24	25 29 30								· · · · · · · · · · · · · · · · · · ·				ty Tax du				☐ No	
9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent 81 Name									
HOUK, RAY SR.								Nan	ne									
2141 HWY 97 N.								Stre	et Addre	ss (P.	O. Box N	Number	is Not Ac	ceptab	le)			
MOLINO FL 32577														·				
									84 City - 85 Zip Code									
11 Pursuant	 																	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.																		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE																		
12.		OFFICERS AN			,,,,	13.						IS/CHAI	NGES TO	OFFIC		ID DIRECTO	3S IN 12	
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CITY-ST-ZIP	MOLINO	FL				2.40	my-s	T-ZIP										
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NAME	HOUK, RAY, JR					3,2 NA	ME		-								_	
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CITY-ST-ZIP						6.4 CIT			Ī									
14. Lhereby c	ertify that the	information supplied w	ith this	filing does	not qualify fo				ted in Se	otion	110.07/	3)(i) Ele	rida Stati	utoc 1 f	urthar a	and 6 - 15 - 4 45 -	:	

inclicated entity that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated 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.

SIGNATURE: Ray CHULE SEQUIRED

1-5-98

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