

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

• **AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 613299 (7)

1. Corporation Name
HAMMES ADVERTISING, INC.



Principal Place of Business 896 S. DIXIE HWY. CORAL GABLES FL 33146-2674	Mailing Address 896 S. DIXIE HWY. CORAL GABLES FL 33146-2674
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/16/1979		3a. Date of Last Report 10/09/1995	
21		26		4. FEI Number 59-1902939		Applied For Not Applicable	
22 Suite, Apt #, etc.		27 Suite, Apt #, etc.		5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HAMMES, TERRY 896 S. DIXIE HWY. CORAL GABLES FL 33146-2674				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				FL	85	Zip Code	

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 _____ (NOTE: Registered Agent's signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PST	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	HAMMES, TERRY M.			1.2 NAME			
STREET ADDRESS	460 HARDEE RD			1.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL 33146			1.4 CITY-ST-ZIP			
				2.1 TITLE	☐ Change ☐ Addition		
TITLE		☐ DELETE		2.2 NAME			
NAME				2.3 STREET ADDRESS			
STREET ADDRESS				2.4 CITY-ST-ZIP			
CITY-ST-ZIP				3.1 TITLE	☐ Change ☐ Addition		
TITLE		☐ DELETE		3.2 NAME			
NAME				3.3 STREET ADDRESS			
STREET ADDRESS				3.4 CITY-ST-ZIP			
CITY-ST-ZIP				4.1 TITLE	☐ Change ☐ Addition		
TITLE		☐ DELETE		4.2 NAME			
NAME				4.3 STREET ADDRESS			
STREET ADDRESS				4.4 CITY-ST-ZIP			
CITY-ST-ZIP				5.1 TITLE	☐ Change ☐ Addition		
TITLE		☐ DELETE		5.2 NAME			
NAME				5.3 STREET ADDRESS			
STREET ADDRESS				5.4 CITY-ST-ZIP			
CITY-ST-ZIP				6.1 TITLE	☐ Change ☐ Addition		
TITLE		☐ DELETE		6.2 NAME			
NAME				6.3 STREET ADDRESS			
STREET ADDRESS				6.4 CITY-ST-ZIP			
CITY-ST-ZIP				200001915952 -08/08/96--01018--001 ***225.00			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Terry Hammes *Terry Hammes* July 28, 1996 305-667-1199

CR2E034 (3/96)