

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

FILED

Mar 20 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 626288

(5)

1. Corporation Name
HOUSE OF LETTERS, INC.



Principal Place of Business

2805 DRAKE DRIVE
ORLANDO FL 32810

Mailing Address

2805 DRAKE DRIVE
ORLANDO FL 32810-2222

3. Date Incorporated or Qualified 06/18/1979	3a. Date of Last Report 03/05/1996
4. FEI Number 30-1140226	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business State, Apt. #, etc.	22. City & State	23. Zip	24. Country	25.
26. Mailing Address State, Apt. #, etc.	27. City & State	28. Zip	29. Country	30.

9. Name and Address of Current Registered Agent

GOULD, CAL
2805 DRAKE DRIVE
ORLANDO FL 32810

10. Name and Address of New Registered Agent

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME: DPTS GOULD, CAL	<input type="checkbox"/> DELETE	13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 STREET ADDRESS: 2805 DRAKE DR		13.2 NAME	
12.3 CITY - ST - ZIP: ORLANDO FL		13.3 STREET ADDRESS	
12.4 TITLE	<input type="checkbox"/> DELETE	13.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME		13.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 STREET ADDRESS		13.6 NAME	
12.7 CITY - ST - ZIP		13.7 STREET ADDRESS	
12.8 TITLE	<input type="checkbox"/> DELETE	13.8 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.9 NAME		13.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 STREET ADDRESS		13.10 NAME	
12.11 CITY - ST - ZIP		13.11 STREET ADDRESS	
12.12 TITLE	<input type="checkbox"/> DELETE	13.12 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.13 NAME		13.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 STREET ADDRESS		13.14 NAME	
12.15 CITY - ST - ZIP		13.15 STREET ADDRESS	
12.16 TITLE	<input type="checkbox"/> DELETE	13.16 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.17 NAME		13.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.18 STREET ADDRESS		13.18 NAME	
12.19 CITY - ST - ZIP		13.19 STREET ADDRESS	
12.20 TITLE	<input type="checkbox"/> DELETE	13.20 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.21 NAME		13.21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.22 STREET ADDRESS		13.22 NAME	
12.23 CITY - ST - ZIP		13.23 STREET ADDRESS	
12.24 TITLE	<input type="checkbox"/> DELETE	13.24 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.25 NAME		13.25 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.26 STREET ADDRESS		13.26 NAME	
12.27 CITY - ST - ZIP		13.27 STREET ADDRESS	
12.28 TITLE	<input type="checkbox"/> DELETE	13.28 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.29 NAME		13.29 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.30 STREET ADDRESS		13.30 NAME	
12.31 CITY - ST - ZIP		13.31 STREET ADDRESS	
12.32 TITLE	<input type="checkbox"/> DELETE	13.32 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.33 NAME		13.33 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.34 STREET ADDRESS		13.34 NAME	
12.35 CITY - ST - ZIP		13.35 STREET ADDRESS	
12.36 TITLE	<input type="checkbox"/> DELETE	13.36 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.37 NAME		13.37 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.38 STREET ADDRESS		13.38 NAME	
12.39 CITY - ST - ZIP		13.39 STREET ADDRESS	
12.40 TITLE	<input type="checkbox"/> DELETE	13.40 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.41 NAME		13.41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.42 STREET ADDRESS		13.42 NAME	
12.43 CITY - ST - ZIP		13.43 STREET ADDRESS	
12.44 TITLE	<input type="checkbox"/> DELETE	13.44 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.45 NAME		13.45 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.46 STREET ADDRESS		13.46 NAME	
12.47 CITY - ST - ZIP		13.47 STREET ADDRESS	
12.48 TITLE	<input type="checkbox"/> DELETE	13.48 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.49 NAME		13.49 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.50 STREET ADDRESS		13.50 NAME	
12.51 CITY - ST - ZIP		13.51 STREET ADDRESS	
12.52 TITLE	<input type="checkbox"/> DELETE	13.52 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.53 NAME		13.53 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.54 STREET ADDRESS		13.54 NAME	
12.55 CITY - ST - ZIP		13.55 STREET ADDRESS	
12.56 TITLE	<input type="checkbox"/> DELETE	13.56 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.57 NAME		13.57 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.58 STREET ADDRESS		13.58 NAME	
12.59 CITY - ST - ZIP		13.59 STREET ADDRESS	
12.60 TITLE	<input type="checkbox"/> DELETE	13.60 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 if changed, or only in attachment with an address.

SIGNATURE: *Calvin Gould*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17 Mar 97 896-2777
Date Daytime Phone #

CR2E034 (9/96)