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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 636832

1. Corporation Name

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90226 043 ***158.75

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HIUGE BUILDERS, INC.								
Principal Plac	ce of Business	Mailing Address	 .			E BILBY (BUBY 1910 ITAL BIBIT B	HEN BURN BURN B	HON BION HON
707 JONES A		707 JONES AVE						•
HAINES CITY	*	HAINES CITY FL 33844			pc	NOT WRITE IN THIS	SPACE	
					3. Date incorporated of	or Qualifed		
					09/20/1979			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21	200	26	•		59-1938405		No	t Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status	Desired	\$8.75	
22		27		-	J. Certificate of Otatus	Desired (VE)	Fee Re	equired
City & Sta	ate	City & State			6. Election Campaign	- 11	\$5.00	
23		28		<u>. </u>	Trust Fund Contribu	ution	Added t	to Fees
Zip	Country	Zip	Country		8. This corporation ov			ши _т
24	25		30		Personal Property		Yes	□No
	9. Name and Address of Curre	ent Registered Agent	94	Name a	10. Name and Addres	ss of New Kegistered	Agent	
ערע	y, herbert w.		81	Name				
	T, NERDERT W. B PALM PLACE		82	Street Addr	ress (P.O. Box Number is I	Not Acceptable)	· ·	
	INES CITY FL		20					
RAI	INES CITT FL		83			•	*	
			84	City	·		85 Zip	Code
	t to the provisions of Sections 607.05					FL		
SIGNATURE	Signature, typed or printed name of registered as		-			•		
				t signature require	d when reinstating)	DATE	ND DIRECTO	DRS IN 12
12.	OFFICERS A	ND DIRECTORS	13.	t signature require	ADDITIONS/CHANC	DATE GES TO OFFICERS AI		
TITLE	OFFICERS A		13. 1.1 TITLE	t signature require	nd when reinstating) ADDITIONS/CHANC		ND DIRECTO	DRS IN 12
TITLE NAME	PD KEY, HERBERT W.	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME		ADDITIONS/CHANC			
TITLE	PD KEY, HERBERT W. s 143 PALM PLACE	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET.	ADDRESS	ADDITIONS/CHANC			
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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 adcurate 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 appear of the corporation of the receiver or trustee empowered.

SIGNATURE:

04-27-99

(941) 422-8240