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

Mailing Address

NAPLES FL 33940

2a. Mailing Address

City & State

Suite, Apt. #, etc.

SUITE 101

26

1044 CASTELLO DRIVE

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 850050

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

1044 CASTELLO DRIVE

NAPLES FL 33940

SUITE 101

21

HALL ENTERPRISES, INC.

.3								
Zip	Country	Zip .	Zip . Country			8. This corporation owes the current ye		
.4	25	29	30			Personal Property Tax.		□No
 1	9. Name and Address of Current					10. Name and Address of New Regist	ered Agent	
	(3C) A. (73			81 Na	ne			1
GROTH, ROBERT W				82 Str	ot Addres	ss (P.O. Box Number is Not Acceptable)	-	·
1044 CASTELLO DRIVE				52 311	et Addres	Sa (1.0. Dok Humber to Hotel Geoples to)	ela e elektral dili elektrik	
SUITE 101				83	-	A COLUMN AND AND A SECOND	網構開門	
NAPLES FL 33940							金融 名称 ひかける 40 ge 2	(8) 4 (1) (1.8) E3E - 7
				84 Cit	<i>f</i>		FL 85 Zip C	. l
<u>, , , , , , , , , , , , , , , , , , , </u>	207.0500	COZ ACOD Florido S	tatutaa tha a	hove pan	ed como	ration submits this statement for the purpor's hoard of directors. I hereby accept the	se of changing its	registered
					orporation	i's board of directors. I hereby accept the	appointment as req	gistered
MPLagent. I	am familiar with, and accept the obligation	ons of, Section 607.0505	i, Florida Stat	utes.		· · · · · · · · · · · · · · · · · · ·		
SIGNATURE	_					Di	. ,	
0.0.0.0.0.0	Signature, typed or printed name of registered agent		<u> </u>	l Agent signa	ure required s	ADDITIONS/CHANGES TO OFFICE		RS IN 12
12	OFFICERS AND		13.		- 1		☐ Change	Addition
TITLE	DPT	☐ DELET				经支撑基本		_
NAME	HALL, IAN SCARR	•	1.2 N	AME				
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CITY-ST-ZIP	ENGLAND			ITY-ST-ZIP		<u> </u>	C Observe	□ Addition
TITLE	VPS	☐ DELET	E 2.1 T	TLE			☐ Change	☐ Addition
NAME	GROTH, ROBERT W		2.2 N	AME:			•	·
STREET ADDRES	AND CASTELLO DOUT		2.3 S	TREET ADDR	ESS		-	
	NAPLES FL 33940		2.40	CITY-ST-ZIP	i	<u> </u>		
CITY-ST-ZIP	1444 EEG 12 30340.	☐ DELET					☐ Change	☐ Addition
: CA	OTH. AGROPTON.		3.2 N	AME				
NAME	A CANADA CONTRACTOR			TREET ADDR	F88		The saite of the	1.79 1-30 30°
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NAME				IAME	-			
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CITY-ST-ZIP	GET			ITY-ST-ZIP				□ A 3 4 2 !
TITLE	Philade, Mary Co. of Co.	☐ DELE	TE 6.1 7	TILE		•	Change	☐ Addition
NAME	TOWN PLAN. THE STATE TOWN		6.21	IAME		•		
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OTTV. ST. 710			6.4 (CITY-ST-ZIP	1			

FILED Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90014 032 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/17/1981 Applied For 4. FEI Number Not Applicable 59-2125484 \$8.75 Additional 5. Certifcate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing

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 occiver 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, of or an attachment with an address, with all other like empowered.