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

PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

BARTOW FL 33830

F51972

(0)

M.C. HAMMER ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2001 E. F. GRIFFIN RD	2001 E. F. GRIFFIN RD.
BARTOW FL 33830	BARTOW FL 33830

FILED Jan 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address		ress		4 I DOLLER SIDI GLIRI LIDIR IDILI SIDI REGI SIDI GERI	I MINIT DENIT MINIT MINIT LANG	
2001 E. F. GRIFFIN RD BARTOW FL 33830 US		BARTOW FL	2001 E. F. GRIFFIN RD. BARTOW FL 33830 US		DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified	
					11/01/1981	
2. Principal Place of Business 2a. Mailing Address			ddress		4. FEI Number	Applied For
21	21 26			59-2142079	Not Applicable	
22	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	City & State City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24	Zip Country 25	7ip	30	untry	This corporation owes or has paid the cu Personal Property 1ax due June 30.	Irrent year Intangible X Yes No
HAMMEH, MARVIN C				10. Name and Address of New Registered Agent		
				81 Name 82 Street Ac	Idress (P.O. Box Number is Not Acceptable)	

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

83 84 City

Street Address (P.O. Box Number is Not Acceptable)

agent. I am familiar with, and accopt the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typod or printed name of registered agent and life	n if anolicature (NOT	Flogistored Agent signature requir	ired when reinstaling) DATE			
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PST	DELETE	1.1 TITLE	Change Addition			
NAME	HAMMER, MARVIN C		1.2 NAME				
STREET ADORESS	2001 E. F. GRIFFIN ROAD		1.3 STREET ADDRESS				
CITY-ST-ZIP	BARTOW FL		1.4 CITY-ST-ZIP				
TITLE	D	DELETE	21 THILE	☐ Change ☐ Addition			
NAME	HAMMER, MARVIN C		2.2 NAME				
STREET ADDRESS	2001 E. F. GRIFFIN ROAD		2.3 STREET ADDRESS				
CITY-ST-ZIP	BARTOW FL		2. 4 CITY - ST - ZIP				
TITLE		DELETE	3.1 TITLE	Change Addition			
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE	Change Addition			
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-7IP				
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition			
NAME]			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 GITY-ST-ZIP				
TITLE		DELETE	6.1 1)TLF	Change Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CHY-ST-7IP			6.4 C(TY - ST - 7)P				

14. Thereby 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 on an attachment with an address.

..... 1-8-90 OUL 577361

Zip Code