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

CORPORATION **ANNUAL REPORT** 1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name F9400001264 (0)

**FILED** Mar 12 1998 8:00am Secretary of State

HOWAI	RD'S FISHING EXCURSIONS	, INC.			
Principal Plac	e of Business	Mailing Address		— I GEBUIDO (IUR IBUK DIBKI DAKI BUUU DEKU BUUK B	OLB! INDIO 15540 OLIVI OLDI 1901
HOWARD FIS	SHING EXCURSIONS SUWANNEE FL	P.O. BOX 297			
LOT 552 LOT 552 SUWANNEE FL 32692 SUWANNEE FL 32692 US US				DO ALOT MOSTS IN THE	0.004.05
				DO NOT WRITE IN THI.  3. Date Incorporated or Qualified	S SPACE.
US		08		( * · · · · · · · · · · · · · · · · · ·	ļ
2. Principal P	lace of Business	2a. Mailing Address	······································	03/14/1994 4. FEI Number	Applied For
	552 HEATHAVE		マシブ	59-3212124	Not Applicable
Suita Ant	# oto	Suite, Apt. #, etc.			\$8.75 Additional
22 0,0	Box 297	27		6. Certificate of Status Desired	Fee Required
City & Stat	0	Cily & State		6. Election Campaign Financing	\$5.00 May Be
	NANNEE FC	28 SUWANN		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	<b>8.</b> This corporation owes or has paid the c	
24 32 (		29 32692 3	O DIXIE		Yes No
9. Name and Address of Current Registered Agent  HANNITON HOWARD M. 81 Name				10. Name and Address of New Registere	u Agent
INMILION, NUMARU N					
LOT 552 HEATH AVE.			82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
SUWANEE FL 32692			83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607,1508, Florida Statutes	the above-named core		
office or r	egistered agent, or both, in the State of	of Florida, Such change was aut	thorized by the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
	in lanılılar witir, and accept the congar	ions of, section 607.0505, mone	ua Siaiules.		
SIGNATURE	Signature, typod or printed name of registered agent	and tilk if applicable (NOTE F	Registered Agent signature requir	red when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PT	☐ DELETE	1.1 TITLE		Change Addition
NAME	HAMILTON, HOWARD H		1.2 NAME		
STREET ADDRESS	LOT 552, HEATH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	SUWANEE FL	···	1.4 CITY-ST-ZIP	,	
TITLE	5	☐ DELETE	2.1 TIBLE		Change Addition
NAME	HAMILTON, THELMA J		2 2 NAME	F .	
STREET ADDRESS	LOT 552, HEATH AVE.		23 STREET ADDRESS		
CITY-ST-ZIP	SUWANEE FL	DELETE	2. 4 CITY- ST - ZiP		Change Addition
TITLE		L.J DECER	3.1 TITLE		C. CHANGE C. MUNICINI
NAME CIDEET ADODESS			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS			3.3 STMEET ADDRESS		
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-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		Í
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY+ST-ZIP			6.4 CITY-ST-ZIP		
44	a a self bl a bl i - da a a casa - c - c - c - d a cel c - is	1 41 41 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1	the control of the control of the	Continue 110 07/2/(i) Florido Statutos I further	

to and accurate and that my signature shall have the same legal effect as if made under oath; that I am an overed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in oss.