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 #

H13646

(5)

HAL SLATON, INC.

FILED Feb 11 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				IBAN BEBUN BUBUN BUBUN BEBUN BUBUN FARA
6126 CHES COURT		6126 CHES COURT				
ORLANDO FL 32818		ORLANDO FL 32819 US			DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified	
					07/20/1984	
2. Principal Pla		2a. Mailing Address			4. FEI Number	Applied For
	ay Hill Blvd.	26 9162 Bay Hil	l Blvd.		59-2430275	Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State	ty & State		6. Election Campaign Financing	\$5.00 May Be
		100 Oalamda El				Added to Fees
Zip	Country	Zip	Country		B. This corporation owes or has paid t	he current year intangible
24 32819	25 USA	J=-1	o USA		Personal Property Tax due June 30	
9. Name and Address of Current Registered Agent					10. Name and Address of New Regis	tered Agent
	ATON, HAL		81 Nam			
6126 CHES COURT			82 Stree	reet Address (P.O. Box Number is Not Acceptable)		
) OR	LANDO FL 32819		83	OZ DO	iy fill blyu.	
						lool 7 o d
			84 City	l ando	n.	FL 85 Zip Code 32819
11. Pursuant te	the provisions of Sections 607.0502	and 607.1508, Horida Statutes	the above pame	d corpo	eration submits this statement for the nurs	oce of changing its registered
office or registered agent, or both, in the State of Florida State of State St						
SIGNATURE / CITAL DATE						
	stgradine typed or proved many of registered agent.	· · · · · · · · · · · · · · · · · · ·	Registered Agent signal	ure required	d when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE
12.	OFFICERS AND	DELETE	13. 1.1 TITLE	1	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	SLATON, HAL W.		1.2 NAME	Ha	al W. Slaton	
STREET ADDRESS	6126 CHES COURT		1.3 STREET ADDRES		62 Bay Hill Blvd.	
CITY-ST-ZIP	ORLANDO FL		1.4 CHY-ST-ZIP		lando, FL 32819	
TITLE		☐ DELETE	2 1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREET ADDRES	s		
CITY-ST-ZIP		DELETE	2 4 CITY - ST - ZIP	_		Change Addition
TITLE			3.1 TITLE 3.2 NAME			Oliange Addition
NAME STREET ADDRESS			3.3 STREET ADDRES	s		
CITY-ST-ZIP			3.4. CITY-ST-ZIP	"		
TITLE		DELETE	4 1 TITLE	1		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRES	s		
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		[_] DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRES	S		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	+		Change Addition
TITLE			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRES	,		
CITY-ST-ZIP			6.4 City-St-ZiP	Ĭ		
	ertify that the information supplied will	this filme does not qualify for		ated in S	Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the information

namely some that it is information supplied with this limit does not quality for the exemption stated in Section 119.0 (13)(), Florida Statutes, it further certify that the information indicated on this annual report or suppliemental 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 chapter of only in all appears in a paddress.