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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H56679

(4)

HOOGLAND ENTERPRISES, INC.

FILED
Mar 21 1997 8:00am
Secretary of State

Second Part Market	Principal Maid	e or Business	Maiing Ad	aress						#71 #1 #17	*****	
2. Principal Table in Corporated or Qualified 3. Date of Leaf Report Co. 15/13/1868 22/15/1986 22/15/15/15/15/15/15/15/15/15/15/15/15/15/	NEW PORT RK	PRIVE CHEY FL 34654	NEW PORT		14654-3504							
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Section Sect		lace of Business	2a. Mading	Address							Ap	olied For
City & State	21							59-2772232				
State Stat	Suite, Apt	#. etc	h==-1	Vpt. #, etc.				5. Certificate of Status Desired				
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87 Name	24	25	29		30			· · · · · · · · · · · · · · · · · · ·				,
82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Codo 84 City FL 85 Zip Codo 85 Zip Codo 86 City FL 85 Zip Codo 87 Zip Codo 88 Zip C		9. Name and Address of Curre	ent Registered Ag	gent				10. Name and Address of New Re	lstered /	lgent		F
ST. PETERSBURG FL 33710 88					81	1 1	Name					
84 C4y					82	2 5	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
11. Fundamental to the provisions of Sections 607 0562 and 607 1508. Florida Statutos, the above-named corporation submits this statement for the purpose of changing its 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 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 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 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 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 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 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 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 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 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 agent, or both in the such accept the observation of Florida Such changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florida Such changes was authorized by the corporation's barded of Florida Such changes was authorized by the corporation					83	3						
11. Pressured to the processines of Sections 507 0502 and 507 1508 Floridal Statutes, the above named corporation submiss this statement for the purpose of changing its registered able or or repair can familiar with, and accept the obligations of, Section 607 0505, Floridal Statutes SIGNATURE					84	4 (Dity			85	Zip C	ode
SIGNATURE TOP ICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TO OFFICERS AND DI	44 Parencast	to the proportions of Speciage 607.06		Florida Ctali	itee the above	Т.	amod con	norston submits this statement for the s			no ite	ropistored
Math	office or i	registered agent, or both, in the Stat	e of Horida, Such	change was	authorized b	ov th	ie corpora	tion's board of directors. I hereby accept	t the app	ointme	nt as i	egistered
12.	SIGNATURE	2			53. F							
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14. I do 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 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 changed, or on an attachment with an address.

SIGNATURE:

Stude Con Hinted Byte of Signing of Fight Of Directory - Jeassures 3/18/97 (818)861-107