

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra R. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H92431

(6)

1. Corporation Name

G H R CORPORATION



Principal Place of Business

3740 PINEBROOK CIR
#404
BRADENTON FL 34209
US

Mailing Address

3740 PINEBROOK CIR
#404
BRADENTON FL 34209
US

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ROWE, MARY J.
3513 57TH AVE. DR., W.
BRADENTON FL 33507

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.03(2) and 607.1506, 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 agent. I am familiar with and accept the obligations of Section 607.03(3), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	ROWE, GEORGE	
STREET ADDRESS	4012 25TH ST., W.	
CITY-STATE-ZIP	BRADENTON FL	
TITLE	DST	DELETE
NAME	ROWE, MARY	
STREET ADDRESS	3740 PINEBROOK CIR #404	
CITY-STATE-ZIP	BRADENTON FL	
TITLE	PD	DELETE
NAME	ROWE, MARK S.	
STREET ADDRESS	1105 KINNEY AVE.	
CITY-STATE-ZIP	AUSTIN TX	
TITLE	D	DELETE
NAME	ROWE, KAREN L.	
STREET ADDRESS	631 HARBOR AVE	
CITY-STATE-ZIP	ELLEMENTON FL	
TITLE	D	DELETE
NAME	ROWE, JEFFREY M.	
STREET ADDRESS	304 COLORADO	
CITY-STATE-ZIP	AUSTIN TX	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 a trustee or a person 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 be an attachment with an address.

SIGNATURE:

MARY J. ROWE *Mary J. Rowe*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96

941-795-1622

CR2E034 (12/95)