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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # J31574

(3)

FILED Apr 14 1997 8:00am Secretary of State

HENWEL, INC. Principal Place of Business Mailing Address 2594 BENTLEY DRIVE 2594 BENTLEY DRIVE PALM HARBOR FL 34684 PALM HARBOR FL 34684-1803						
					 Date incorporated or Qualified 09/04/1986 	3a. Date of Last Report 06/11/1996
2. Principal I	Place of Business	2a. Mailing Address	····	·	4. FEI Number	Applied For
21					59-2719002	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	~-1		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				<u></u>	6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation has liability fo	
24	25 Name and Address of Curren	29	30]			Yes No
FO	9. Name and Address of Currer V. ODEOODV A. ECO.	it Registered Agent		B1 Name	10. Name and Address of New R	egisterea Agent
FOX, GREGORY A., ESQ. 28050 US 19 NORTH						
STE		'	Street Ado	dress (P.O. Box Number is Not Accepta	lble)	
	EARWATER FL 34621		Ţ	83		
			3	34 City		85 Zip Code
				' '		#E
office or agent. I s					rporation submits this statement for the alion's board of directors. I hereby acce	
12.	Signature, typed or printed name of registered age OFFICERS AN		L: ftegistered .	Agent signature requ	irod when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TITLE	I DCEO	DELETE	1,1 1171	F T	7,007,1010,017,11010	Change Addition
NAME	HENDRIX, JOHN		1.2 NAN	1E)		•
STREET ADDRESS	2594 BENTLEY DR.		1,3 S1K	EE1 ADDRESS		ļ
CITY-ST-ZIP	PALM HARBOR FL		1.4 C(1)	r-S1-ZIP		
TITLE	D	☐ DELFTE	2.1 717L	F		Change
NAME	LAVAN, JAMES		2.2 NAM	ì	:.	
STREET ADDRESS	4309 N POTATOC RD			FET ADDRESS		
CITY-\$1-ZIP	TUCSON AZ	DELETE		Y - S1 - ZIP		Change Addition
TITLE	WILBORN, ROGER	L3 DETERIE	3.1 TITL			Change Addition
NAME Street address	475 SANSOME ST STE 800		3.2 NAM	ET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA			Y-ST-ZIP		
TITLE	4-44 118 44 100 4 44	DELETE	4.1 TITL			Change Addition
NAME			4. 2 NAM			_ ,
STREET ADDRESS				EET ADDRESS		i (
CITY-ST-ZIP				- S1 - ZIP		1
TITLE		☐ DELETE	5.1 7()()			Change Addition
NAME	ļ		5.2 NAM	E		
STREET ADDRESS			5.3 STRI	EET ADDRESS		ı
CITY-ST-ZIP	A.		···	- ST - ZIP		
TOTLE		☐ DELETE	6.1 NTL	1		Change Addition
NAME			6.2 NAM			
STREET ADDRESS				E1 ADDRESS		į
CITY-ST-ZIP			6.4 C/TY	-SI-ZIP		Ĭ

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 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 13 if changed, or on an atlachment with an address.