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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # J60072

(2)

Corporation Name HALL'S INDUSTRIAL SUPPLIES, INC. Principal Place of Business Mailing Address						
2954 JEANE OVIEDO FL	ETTE COVE	Mailing Address 2954 JEANETTE CO OVIEDO FL 32765	2954 JEANETTE COVE			
					 Date Incorporated or Qualified 03/02/1987 	3a. Date of Last Report 05/01/1995
Principal Place of Business		2a. Mailing Address			4. FE! Number 59-2893069	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Contificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 [Zip	Country	28 Zip	Countr	~v	Trust Fund Contribution 8. This corporation has liability for	L_J Added to Fees
24	25	29	30		Florida Statutes 🔲 Ye	s XNo
	9. Name and Address of Cur	rent Registered Agent	8	I Name	10. Name and Address of New	Registered Agent
HALL, F	RANDALL W.					
2954 JEANETTE COVE			82		dress (P.O. Box Number is Not Accepta	ble)
OVIEDO) FL 32765		83	3		
			84	1 ′		FL 85 Zip Code
SIGNATURE _	Signature, typed or printed name of registrated a	ector for obos, Fiorida Statific	T 13. 1. FTITLE	ent signature focum		DATE FICERS AND DIRECTORS IN 12 Change Addition
CITY-ST-ZIP	OVIEDO FL		13 STREE 14 City-	J ADDRESS ST- ZIP		
TITLE	ST HALL BOSE B	☐ DELFIE	2 1 1 11 LF			Change Addition
NAME STREET ADDRESS	HALL, ROSE P. 2954 JEANETTE COVE		2.2 NAME			
CITY-ST-ZIP	OVIEDO FL		235IRFE 24CITY-	LADDRESS S1 - 7/P		
TITLE		☐ DELE1E	3 1 TITLE	····		Change Addition
NAME CIRCLY ADDRESS			3 2 NAME			
STREET ADDRESS CHTY-ST-ZIP				T ADDRESS		
TITLE		DELETE	3.4 CITY- 4.1 THLE	S1-7P		Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREE	I ADDRESS		
DITY-ST-ZIP TITLE	W. (W. 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884	ED DELETE	4.4 CHY-1	SI-7IP		
NAME		L_J DELETE	5. 1 TITLE 5.2 NAME			Change Addition
STREET ADDRESS				I ADDRESS		
CITY-ST-ZIP			5.4 CITY -			
TITLE		[] DELETE	6 1 TITLE	···		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREE	FADORESS		
oath; that I appears in E	an an officer of firestor of the cor Block 12 or Block 13 if changes.	ndai report or supplemental and noration or the receiver or twick	riual report is tri ee empowered Iress	es not qualify to the and accurate the	for the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 607, Fl	same legal effect as if made under lorida Statutes; and that my name
SIGNATI	JRE: /) SIGNATURE AND TYPED	OR PRINTER NAME OF SIGNING OFFICE	ER OR DIRECTOR	WDALL	W. HALL 4/29/96	2 366-7334 Dayline From #