

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L36216

(4)

1. Corporation Name

HUSTED INTERNATIONAL PROPERTY CORPORATION

Principal Place of Business

2550 KIRBY AVENUE NE
SUITE 206
PALM BAY FL 32905
US

Mailing Address

P.O. BOX 3686
VERO BEACH FL 32964
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/11/1989

3a. Date of Last Report

03/11/1996

4. FEI Number

65-0181753

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2835 KIRBY AVE

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

22 SUITE 107

Suite, Apt. #, etc.

27

City & State

23 PALM BAY

City & State

28

Zip

24 FL

Country

25 BREVARD

Zip

29 32905

Country

30

9. Name and Address of Current Registered Agent

CALDWELL, WILLIAM W
756 BEACHLAND BLVD.
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name

Henry D. Clarke, Jr.

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

2835 Kirby Avenue, Suite 107

83

84 City

Palm Bay

85 Zip Code

FL 32905

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS CLARKE, HENRY D JR
CITY-ST-ZIP 2550 KIRBY AVENUE NE #206
PALM BAY FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS CLARKE, MICHAEL W.
CITY-ST-ZIP 2550 KIRBY AVENUE NE #206
PALM BAY FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS SORESENSEN, J. DALE
CITY-ST-ZIP 634 BEACHLAND BLVD.
VERO BCH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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-09/23/97--01047--021

****165.00 ****165.00

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

2 SIGNATURE OF DALE SORESENSEN President 8/12/97

CR2E034 (4/97)