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.)

Sep 03 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # (2)PRINCE-HEATON ENTERPRISES, INC. Principal Place of Business Mailing Address 3172 LAKE GEORGE COVE DR. 1250 WEST GARMON RD. ORLANDO FL 32812 ATLANTA GA 30327 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 05/08/1990 <u>01/10/1997</u> 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 21 59-3008950 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 П 28 Trust Fund Contribution Added to Fees Zip Country Country Zip. This corporation owes or has paid the current year Intangible 24 29 Yes 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HEATON, MODINE Name 3172 LAKE GEORGE COVE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32812 83 84 Zip Code 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 little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Change 1.1 3/11/8 Addition PRINCE, JAMES R. NAME 1.2 NAME 1250 WEST GARMON ROAD STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA 30327 CITY-ST-ZIP 1.4 C(TY+ST-7)P STD DELETE TITLE 2.1 TITLE Change Addition HEATON, MODINE NAME 2.2 NAME 3172 LAKE GEORGE COVE DR. STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32812 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change ___ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change TITLE ☐ DELF1E Addition . 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 of the regiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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appears in Block 12 or Block 13 if chark

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