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

PROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

M91599

(4)

HJK PUBLICATIONS, INC.

## **FILED** May 05 1998 8:00am Secretary of State



1018 ROSETTA DR DELTONA FL 32725  DO NOT WRITE IN TH  3. Date incorporated or Qualified 07/21/1988  2. Principal Place of Business 21. 366 E GRAVES AVE 26 36C E GRAVES AVE 59-2919758	
DO NOT WRITE IN TH  3. Date Incorporated or Qualified  07/21/1988  2. Principal Place of Business  2a. Mailing Address  4. FEI Number	
2. Principal Place of Business         2a. Mailing Address         4. FEt Number	IIS SPACE
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	
Bi i iliopa i dos or basilions	
21 366 E GRAVES AVE 26 36C E GRAVES AVE 59-2919758	Applied For
	Not Applicable
Suite Ant # etc.	\$8.75 Additional
22 STE D 27 STE D 5. Certificate of Status Desired	Fee Required
City & State City & State 6. Election Campaign Financing	\$5.00 May Be
23 ORANGE CITY FL 28 ORANGE CITY, FL Trust Fund Contribution	Added to Fees
Zip Country 2 ip Country 8. This corporation owes or has paid the	
24 32763 25 USA 29 32763 30 USA Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Register	ed Agent
ROSENBERG, RICHARD A. 81 Name	
227 SOUTH VOLUSIA AVE  62 Street Address (P.O. Box Number is Not Acceptable)	
ORANGE CITY FL 32763	
84 City	85 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 purpos 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	e of changing its registered appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
SIGNATURE	
Signature, typod or printed name of registered agent and bite if applicable (NOTE Registered Agent signature required when reinstating) DAT	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS A	
TITLE P DELETE 1.1 TITLE	Change L. Addition
NAME HUTCHINSON, JOHN 1.2 NAME	
STREET ADDRESS 1018 ROSETTA DR 1.3 STREET ADDRESS	
CITY-ST-ZIP DELTONA FL 1.4 CITY-ST-ZIP	
TITLE DELETE 21 TITLE	Change Addition
NAME 2.2 NAME	
STREET ADDRESS 23 STREET ADDRESS	•
CITY-ST-2IP	Change Addition
_	<del></del> , –
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
grade repried	Change Addition
CRTY-ST-ZIP 3.4. CITY-ST-ZIP	El cuellès El voques
CITY-ST-ZIP	
CITY-ST-ZIP   34.CITY-ST-ZIP     TITLE   DELETE   4.1 TITLE   4.2 NAME   4.2 NAME   4.2 NAME   4.3 NAME   4.	
CITY-ST-ZIP	
34. CITY-ST-ZIP   34. CITY-ST-ZIP     34. CITY-ST-ZIP     11TLE	
34. CITY-ST-ZIP   34. CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   4.2 NAME   4.2 NAME   4.3 STREET ADDRESS   4.3	Change Addition
34. CITY-ST-ZIP   34. CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   4.2 NAME   4.2 NAME   4.3 STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP   4.4 CITY-ST-ZIP   4.5 CIT	Change Addition
STREET ADDRESS   STRE	☐ Change ☐ Addition
STREET ADDRESS   SALCITY-ST-ZIP   SALCITY-ST-ZIP   SALCITY-ST-ZIP   STREET ADDRESS   STREET ADDRESS   SALCITY-ST-ZIP   SALC	
STREET ADDRESS   STRE	☐ Change ☐ Addition
STREET ADDRESS   STRE	
STREET ADDRESS   STRE	
STREET ADDRESS   STRE	

indicated on this annual report or supplied with the first 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 recover 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 attrichment with an address.