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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90222 014 \*\*\*158.75

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## DOCUMENT # M96250 1. Corporation Name

TITLE

STREET ADDRESS

THE HOME TEAM USA, INC.

Principal Place of Business Mailing Address					(() \$1511 \$1511 \$1511 \$1511 \$1511 \$1511
3620 PARK STRET N ST PETERSEURG FL 33710 US		1216 BUTTONWOOD CIRCLE SEMINOLE FL 33777 US		DO NOT WRITE IN TH	-IS SPACE
00				3. Date Incorporated or Qualifed	
				08/29/1988	
2. Principal Pl	tace of Business	2a. Mailing Address	1 01-	4. FEI Ni mber	Apr lied For
21			n wood e'r	<sup>2</sup> 1 <sup>2</sup> 59-2934124	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State		City & State	lo FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Cour try	Zip Semino	Country	This corporation owes the current year	
24	25	29 33777 30	, , ,	Personal Property Tax.	X Yes ☐No
	9. Name and Address of Current			10. Name and Address of New Register	ed Agent
81			81 Name		
HEHL, RICHARD L SR			82 Street Addr	ress (P.O. Bo) Number is Not Acceptable)	
116 BUTTONWOOD CIRCLE		Ou cet And	CSS (F.O. DOS HAMBOT IS NOT		
ST PETERSBURG FL 33777		83			
			84 City C		85 Zip Code
			1 26	minole F	·L    33777
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State α m familiar with, and accept the obligat	f Florida. Such change was author	the above-named corp orized by the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	e of changing its registered pointment as registered
SIGNATUF E	· · · · · ·				
	Signature, typed or printed no ne of registered agent		gistered Agent signature require		
12.	OFFICERS ANI	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE	P	□ nere ie	<u> </u>		
NAME	HEHL, BETTY J		12 NAME		
STREET ADDRESS	116 BUTTONWOOD CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL. 33777	☐ DELETE	14 CITY-ST-ZIP		Change Addition
NAME	HEHL, RICHARD L.		2.2 NAME		
STREET ADDRESS	116 BUTTONWOOD CIRCLE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL 33777		2 4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	31 TITLE		Change Addition
NAME	HEHL, SR. R		32 NAME		Ì
STREET ADDRESS	116 BUTTONWOOD CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL 33777		3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-ST-ZIP		□ Channa □ Anterior
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		

14. I heretly certify that the informa ion 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 changes, or on an attact ment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

☐ DELETE

SIGNATURE:

☐ Change

Addition