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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9200007882 (3)

1.	Corporation Name											,	
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Principal Place of Business Mailing Address 1405 OAK STREET 1405 OAK STREET **OCOEE FL 34761 OCOEE FL 34761** 3. Date Incorporated or Qualified 3a. Date of Last Report 11/30/1992 06/08/1995 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address 59-3155386 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 City & State City & State 6. Election Campaign Financing **\$5.00** May Be \Box Trust Fund Contribution Added to Fees 23 28 Zip Country $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s 199.032, K Yes □No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORBITT, JUDITH A Street Address (P.O. Box Number is Not Acceptable) 62 1405 OAK STREET 83 **OCOEE FL 34761** 84 City 65 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, typod or printed name of registered agent as o tries if applicable (NOTE: Registered Agent signature recurred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.17016 TITLE SULLIVAN, RICHARD D NAME 1.2 NAME 126 B ADMIRAL AVE. STREET ADDRESS 1.3 STREET ADDRESS **SEBASTIAN FL 32958** CITY-ST-ZIP 1.4 CHY-S1-ZIP ☐ Add:tion DELETE Change TITLE 2 1 TITLE CORBITT, TERREL W 22 NAME NAME 1405 OAK STREET STREET ADDRESS 2.3 STREET ADDRESS OCOEE FL 34761 2 4 CITY-ST-7(P CITY-ST-ZIP DELETE TITLE 3 1 TITLE ☐ Change ☐ Addition CORBITT, JUDITH A NAME 3.2 NAME 1405 OAK STREET STREET ADDRESS 33 STREET ADDRESS OCOEE FL 34761 CITY-ST-7IP 3.4 CHTY - ST - ZIP DELETE Change Addition TITLE 4. 1 TITLE SULLIVAN, JUDITH 4.2 NAME NAME 126 B ADMIRAL AVE. 4.3 STREET ADDRESS STREET ADDRESS SEBASTIAN FL 32958 CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition 5 1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 report or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on a rationiment with an address.

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

) 5/10/96 Date D

Daytime Phone #

CR2E034 (12/95)