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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000006186 (9)

HORIZON ENTERPRISES, INC.

FILED Mar 20 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE
Date Incorporated or Qualified

Principal Place of Business Mailing Address							E IMBINOS ILO SOLO ILIM BOLLI GOLLI		00(10 0(103 (100)	MANTE ON HOUSE
KEY WEST		KEY WEST FL 33040	512 MARGARET STREET KEY WEST EL 33040							
ÜS	12 000.0	US					DO NOT WRITE	E IN THIS	SPACE	
						[;	3. Date Incorporated or Qualified 01/21/1993			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address				4, FEI Number		A	pplied For
21		26				65-0384568 Not Applicat				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	
22		27			, ,	e. Compare of Status Desired		Fee A	equired	
City & State	e	City & State				6. Election Campaign Financing		\$5.00	May Be	
23	_	28					Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cou	ntry			This corporation owes or has p			
24	25		30				Personal Property Tax due June			_] No
g, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent									Agent	
	EIDE, PAUL A			81	Nam	ne				
5	12 MARGARET STREET			82	Stre	et Address	(P.O. Box Number is Not Accepta	ole)		
l	PT 1		ļ	_					·	
K	EY WEST FL 33040			83						
			İ	84	City			Fl	85 Zip	Code
44 Pureuant t	to the provisions of Sections 607.050	2 and 607 1508. Florida Statute	as the at	nove	-nam	ed corporat	tion submits this statement for the	purpose d	of changing i	ts registered
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 and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AN		13.				ADDITIONS/CHANGES TO OFFI	CERS AN	D DIRECTO	R\$ IN 12
TITLE	D	DELETE	1.1 T(T	LE					Change	☐ Addition
NAME	SEIDE, PAUL A		1.2 NA	ME						
STREET ADDRESS	512 MARGARET STREET		1.3 ST	REET A	ADDRES	ss				
CITY-ST-ZIP	KEY WEST FL		1.4 CI	TY-ST	[-ZIP					
TITLE	D	☐ DELETE	2.1 TII	LE					Change	Addition
NAME	SEIDE, BONITA F		2.2 NA	ME		ł				
STREET ADDRESS	512 MARGARET STREET		2.3 ST	2.3 STREET ADDRESS		SS				
CITY-ST-ZIP	KEY WEST FL				7-2IP					
TITLE	DELETE 3.1			LE					☐ Change	Addition
NAME			3.2 NA	ME						
STREET ADDRESS			3.3 ST	REET A	ADDRES	ss				
CITY-ST-ZIP			3.4. CI	TY-S	1 - ZIP					
TITLE		☐ DELETE	4.1 TIT	LE	-				☐ Change	Addition
NAME			4. 2 N/	AME						
STREET ADDRESS			4.3 ST	REET /	ADDRES	ss				
CITY-ST-ZIP			4.4 CII	IY-ST	- ZIP					
TITLE		DELETÉ	5.1 TIT	LE.					☐ Change	Addition
NAME			5.2 NA	ME						
STREET ADDRESS			5.3 ST	REET /	addres	ss				į
CITY-ST-ZIP			5.4 CI							
TITLE		☐ DELETE	6.1 TIT						Change	Addition
NAME			62 NA							
STREET ADDRESS			1		addres	ss				
CITY-ST-ZIP			6.4 CI							
3111 G1 BR										

14. I 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 on an attachment with an address.