## 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** 

## DOCUMENT # **P93000028665**1. Corporation Name

HART TO HART BUSINESS ENTERPRISES CORPORATION

Principal Place	of Business	Ma	ailing Address						• • •		
9736 BAY VISTA ESTATES BLVD ORLANDO-FL 32836			9736 BAY VISTA ESTATES BLVD ORLANDO FL 32836					DO NOT WR	ITE IN THIS	SPACE	
								3. Date Incorporated or Qualifec	<del>- '</del>		
								04/16/1993			
2. Principal Pla	ace of Business	2a.	Mailing Address					4. FEI Number		Apr	plied For
21		26						58-2046019			t Applicable
Suite, Apt. 1	#, etc.	27	Suite, Apt. #, etc.					5. Certifcate of Status Desired	×	\$8.75 A Fee Re	
City & State			City & State					6. Election Campaign Financing	П	\$5.00	May Be
23		28						Trust Fund Contribution	<del>_</del>	Added to	o Fees
Zip	Country		Zip		untry			8. This corporation owes the cur	rent year Int		□No
24	25	29		30				Personal Property Tax.	Pagistared		LINO
	9. Name and Address of Current	Regis	tered Agent		81	Name		10. Name and Address of New	Registereu	Agent	
HART, RODGER I					"	IVAILLE		. <u></u>			
9736 BAY VISTA ESTATES BLVD					82 Street Addres			ss (P.O. Box Number is Not Accept	able)		
ORLANDO FL 32836				1	83						
One	1100 12 02000				0.5						
					84	""		,	FL	85 Zip C	
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State or	and 6	07.1508, Florida Statu	tes, the	abovi	e-named of	corpor	ration submits this statement for the	e purpose of pt the appoi	changing its ntment as re	registered gistered
agent. I ar	it latitud vital, and accept the bengan	7.5	, 00011011 001 10000, 1 10		tutes			a Server of Assets			• •
SIGNATURE	RH		ODGER. HAI		<u>′</u>				DATE		/
	Signature, typed or printed name of registered agent				<u> </u>	nt signature re	quired v	when reinstating) ADDITIONS/CHANGES TO O		ID DIRECTO	RS IN 12
12.	OFFICERS AND	DIKE	DELETE	13	TITLE			ADDITIONS/CHANGES TO O	TICENO A	Change	Addition
TITLE	<del>-</del>		- Deterie		NAME						_
NAME	HART, HAZEL D. 9736 BAY VISTA ESTATES BLV	n				T ADDDDCCC					
STREET ADDRESS	ORLANDO FL	U				T ADDRESS					
CITY-ST-ZIP	URLANDO FL		□ DELETE		CITY-S TITLE	1-ZIP				Change	Addition
TITLE					NAME					_ ,	_
NAME						TADDRESS					
STREET ADDRESS					CITY-5						ſ
CITY-ST-ZIP TITLE			DELETE		TITLE	51-ZIF				Change	Addition
NAME					NAME					~	
STREET ADDRESS						T ADDRESS					1
CITY-ST-ZIP					CITY-S	į.					
TITLE			☐ DELETE	_	TITLE					Change	Addition
NAME					NAME						
STREET ADORESS				4.3	STREE	TADDRESS					
CITY-ST-ZIP					CITY-S	i					
TITLE			☐ DELETE		TITLE					Change	☐ Addition
NAME					NAME						
STREET ADDRESS				5.3	STREE	TADDRESS					
CITY ST. 7IP				5.4	CITY-S	T-ZIP					

CITY-ST-ZIP 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, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

Change

☐ Addition

**FILED** 

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90105 045 \*\*\*158.75

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