SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1986. AMOUNT QUE ON OR BEFORE 87/86: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REMETATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000031657 (8)

G H INDUSTRIAL, INC.

incipal Place of Business Mailing Address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

96 NOV 15 PM 2:44

Principal Place	or business	Maning Address				
6080 S. PINIE AVE. OCALA FL 34480 US		P.O. 80X 5448 OCALA FL 34478-5448		REINSTATE	HENT_UND_	
U O					3. Date incorporated or Qualified 04/29/1993	04/28/1995
2. Principal Pl. 21 444	ace of Business	2e. Mailing Address 26			4. FEI Number 59-3177845	Applied For St. Not Applicable.
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip 24 344'	78 25 MARION	Zip 29	Countr	у .	8. This corporation has liability for Florida Statutes	or intengible tax under s. 199.032.
-:1	9. Name and Address of Current I		17.2		10. Name and Address of New F	Registered Agent 1. 10 10 10 10 10 10 10 10 10 10 10 10 10
			8	Name		
HORNBY, G G III 2135 N.E. 45TH AVE.				Street Addr	ress (P.O. Box Number is Not Accept	able)
- OC	ALA FL 34470		8		· · · · · · · · · · · · · · · · · · ·	
•			•	- 7		FL S Zip Code
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of marrillar with, and accept he chipati	and 607,1508, Florida Statut	es, the above	e-named corporation	oration submits this statement for the	purpose of changing its registered ::
agent. I ar	m familiar din, an accep he digeti	ons of Soution 607,0505, Flo	orida Statute	8. <i>A</i>	are board or another rivines y desc	0.
SIGNATURE	The K	130	Deele	lent	red when reinstating)	11-15-16
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	ter school action		FICERS AND DIRECTORS IN 12
TITLE	D 0710010 A10	DELETE	1.t TillE			Change Addition
NAME	HORNBY, G.G. III	-	1.2 NAM	<u>بر</u> ا	LOUISY, AG W	
STREET ADDRESS	2135 NE 45TH AVE.		1.3 STRE	ET ADDRESS	1105 SE 1418 51	
CITY-ST-ZIP	OCALA FL 34470		1.4 CITY		ORALA, FL 34	47/
TITLE	D	DELETE	2.1 TITLE	10	4.4.4.	Change Addition
NAME	HORNBY, LORI		2.2 NAM		DANBY, LOKI	
STREET ADDRESS	2135 NE 45TH AVE.			ET ADDRESS 4	<i>''''</i>	/7/
CITY-ST-ZIP	OCALA FL		2.4 CITY		ICALA, FL 349	2 1 2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE		DELETE	3.1 TITLE	l l		Change Addition
KAME			3.2 NAM	· .	1 00002	20098215
STREET ADDRESS			3.3 STRE 3.4. CITY	ET ADDRESS	-11/2	0/9601073013
CITY-ST-ZIP		DÉLETE	4.1 TITLE			375.00 WARK 375. Alban
HAME			4.2 NAV			
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	-ST-ZIP	•	
TITLE		DELETE	5.1 TITLE		•	Change Addition
NAME			52 NAM		· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS				ET ADDRESS	14 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
CITY-ST-ZIP	<u> </u>	DELETE	5.4 City			Change (4) Sept. 10 Change (4) Addition
TITLE	.	C DELETE	6.1 TITLS 6.2 NAM	1		
NAME CERTEST ADODESC				ET ADDRESS		
STREET ADORESS				-ST-ZIP	. See a s	1 WII-12-01 M
CITY-ST-ZIP			0.9 ((1)	-01-11		

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 furnished 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 617, Florida Statutes; and that my name appears in Block 12 or flock. If chapted, or on an attachment with an address.

SIGNATURE:

9-16-96

352-CAY-914