2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Mar 23, 2004 8:00 am Secretary of State

DOCUMENT # P93000052350 1. Entity Name							03-02-2004 90035 029 ***150.00				
HIX MARI	NE SERVICI	E, INC.									
Principal Place of Business			Mailing Address								
3025 CORTEZ ROAD W BRADENTON FL 34207			3025 CORTEZ ROAD W BRADENTON FL 34207				66407394				
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2303	Tace of Business Penns	LUN-M AUF	3. Mailing Address POBOX 6212				- 1 14 14 14 14 14 14 14 14 14 14 14 14 14 1				
Bile, Apl. #, etc.			Suite. Apt. #, etc.			1_	MOORE	CR2E034 (1			
City & State FLA			BRADENTON FL.			4.	4. FEI Number 65-0438231 Applied Fig. 1. Not Applied Fig. 1. Not Applied Fig. 1. Not Applied Fig. 1. Applied F			t Applicable	
_Zip	34207 MANATE		34281 m			TE C 5. Certificate of Status Desire		S8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name											
HIX. RANDALL A							A ル D Y _ / / 」) Box Number is Not Acceptable	<u> </u>			
302 BRA	5 CORTEZ I	ROAD W		30	S PSNNSLVA	NIA A	UŞ				
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when roinstating) DATE											
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be											
Afte	r May 1, 2004 l k Payable to Fl	Fee will be \$550.00. orida Department of	State				Trust Fund Contribution			O May Be to Fees	
10.	Named and Maria and State of the	OFFICERS AND	C. C. C. Santon C. Santon	11.		, At	DDITIONS/CHANGES TO OFF	ICERS AND DI	RECTORS	5 IN 11	
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NAME STREET ADORESS	HIX, RANDALL A ESS 3025 CORTEZ RD WEST			NAM STRE	ET ADDRESS)	
CITY-ST-ZIP	BRADENTON	FL 34207		CITY	-ST-ZIP						
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12 hereby	cortify that the !-	formation supplied with	this filling stone and as all fills		-ST-ZIP	Cact	110 07/0/0 Fledd - Chr. 1	1 6 .00	abas tha '-		
12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal affect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee epipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapt like empowered.											
SIGNATURE: X D X BAUDY HIX 220 04 941-758-4471											