

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000064731**

1. Corporation Name

Haul 'n HALL, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

2a. Mailing Address

21 **8087 Monetary Dr.**

26 Suite, Apt., #, etc.

22 **F-4**

27 City & State

23 **Riviera Beach**

28 City & State

24 **33404**

29 Zip

25 **FL**

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

9/93

1995

4. FFI Number

Applied For
Not Applicable

65-0441383

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 of Registered Agent (if changing the Registered Agent)

Signature of Agent (if changing the Registered Agent)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME **LARRY HALL**

11 NAME

STREET ADDRESS **115 1st Court**

12 STREET ADDRESS

CITY-ST-ZIP **PBG, FL. 33410**

13 CITY-ST-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME **CAREN HALL**

21 NAME

STREET ADDRESS **115 1st Court**

22 STREET ADDRESS

CITY-ST-ZIP **PBG, FL. 33410**

23 CITY-ST-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME

31 NAME

STREET ADDRESS

32 STREET ADDRESS

CITY-ST-ZIP

33 CITY-ST-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME

41 NAME

STREET ADDRESS

42 STREET ADDRESS

CITY-ST-ZIP

43 CITY-ST-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME

51 NAME

STREET ADDRESS

52 STREET ADDRESS

CITY-ST-ZIP

53 CITY-ST-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

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 resident 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.

SIGNATURE:

Caren Hall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

500001853105
-06/06/96--01025--035
*****200.00**

4/30/96

402-878-8795

CR2E034 (12/95)