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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

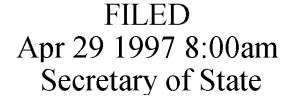
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000068533 (7)

HEMP & HAMMOCKS, INC.

Principal Place of Bus	iness





Principal Place	e of Business	Mailing Address	Mailing Address							
16801 OVERSEAS HWY. KEY LARGO FL 33037		PO BOX 561008 MIAMI FL 33256-	PO BOX 561008 MIAMI FL 33256-1008							
1,5, 5,100		US								
						3. Date Incorporated or Qualified 3a. Date of Last Report 09/23/1993 05/01/1996				
2. Principal Pi	lace of Business	2a. Mailing Add	ess			4. FEI Number	1 4-14	7,100	Applied For	
21		26	F			65-0440704			Not Applica	able
I Sulfa and # aic			Suite, Apt. #, etc.			\$8.75 Additional				
22		27				5. Certificate of Status Desired Fee Required				
City & State	0	City & State				6. Election Campaign Financing		\$5.0	00 May Be	
23		28				Trust Fund Contribution			ed to Fees	
Zip	Country	Zip	Co	Country		8. This corporation has liability for i	ntangible t	ax unde	ers 199 032	,
24	25	29	30	30			Yes [
	9. Name and Address of Cui			T		10. Name and Address of New Re	istered A	gent		
COL	EMAN, PHILLIP LLOYD			81	Name					
	3 SW 78 PLACE			82	C+	(D.C. D. N. J. N. J. A. J. J. N. J. A. J.		····		
	MI FL 33156				Street Addr	ddress (P.O. Box Number is Not Acceptable)				
PORTE	WII 1 E 00 100			83				····		
								·····		
				84	City		FL	85 Z	ip Code	
11 Pursuant	to the provisions of Sections 607	0502 and 607 1508 Flori	da Statutes, lbc	l	named corn	poration submits this statement for the n		hangin	n ite reniste	red
office or re	egistered agent, or both, in the S	tale of Florida. Such char	ge was authoriz	ed by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	t the appo	intment	as registere	∌ď
agent. I a	m tamiliar with, and accept the of	bligations of, Section 607	.0505, Florida St	atutes	.					
SIGNATURE	Signature, typed or printed name of registered	et annual and talled a manual la	(MC)16 Banisto	نده ادم	al a coordina san is	red when reinstaling)	DATE			
12.		AND DIRECTORS	13		i i signature requir	ADDITIONS/CHANGES TO OFFIC		DIBECT	ORS IN 12	
TITLE	PST	D D		THILE		7.05771011070111111020 70 01710		Chang		lition
NAME	COLEMAN, PHILLIP LLOYD			NAME						;
STREET ADDRESS	9013 SW 78 PLACE	,	1		ADDRESS				•	;
	MIAMI FL									
CITY-ST-ZIP TITLE	Michael F	Пр		CITY-S	1 - 21P	· · · · · · · · · · · · · · · · · · ·	- 1	Chane	ge 🔲 Add	lition
NAME		٠ ـ					,		go LI rado	
				NAME	1600100					
STREET ADDRESS			1		ADDRESS					
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NAME				NAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		—————————————————————————————————————		CITY-S	51 - ZIP			105-		GE se
TITLE		∐D		141 LE			ι	Chang	ge L. Add	ation
NAME				NAME						
STREET ADDRESS			43	STREFT	ADDRESS					
CITY-ST-ZIP		——————————————————————————————————————		C-1Y-S	T - ZIP		· · · · · · · · ·	10.		
TITLE		∐ D		TITLE			1	Chan	ge L. Add	ition
NAME			5.2	NAME						
STREET ADDRESS			53	STREET	ADDRESS					
CITY-ST-ZIP				C!TY-S	T-ZIP					
TITLE		□ D	ELETE 61	HILE			1	Chan	ge 🔲 Add	ition
NAME			6.2	NAME						
STREET ADDRESS			63	STREET	ADDRESS					- 1
CITY-ST-ZIP			6.4	City-S	T- ZIP					

14. To 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 of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation