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

PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #** 

P93000075924 (9)

BUNKER HILL INVESTMENTS, INC.

Principal Place of Business Mailing Address % RANDALL L. HILL

% RANDALL L. HILL 3560 MAIN HIGHWAY 3560 MAIN HIGHWAY

**FILED** Apr 18 1996 8:00 am Secretary of State

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COCONUT GROVE FL 33133		COCONUT GROVE PL 33133			3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995				
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				65-0453256			Not Applicable
Suite, Ap	it. #, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.						Additional Required
City & St	ate	City & State	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cou	ıntry		8. This corporation has liability for	intangible ta		
24 25 29 30				•			□No		
<u></u>	9. Name and Address of Curre					10. Name and Address of New F	legistered /	Agent	
				81	Name		•		
HILL	RANDALL L			82	Street Add	tress (P.O. Box Number is Not Acceptat	lal.		
	MAIN HIGHWAY			02	Street Add	siess (F.O. Box Normber is Not Acceptal	леј		
	ONUT GROVE FL 33133			83					
000	51101 G11012 12 00100			84	City		FL	<b>85</b> Z	p Code
familiar SIGNATURE	with, and accept the obligations of, Se  Signature, typed or printed name of registered ag-	ection 607.0505, Florida Stat	utes.			and of directors. I hereby accept the app	DATE		·- · · · · · · · · · · · · · · · · · ·
TITLE	D	DELETE	1.11	nn e		ABBITION OF INTOCO TO OTT		Change	Addition
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NAME	HILL, RANDALL L s 3560 MAIN HIGHWAY				ADDRECC				
STREET ADDRES		00			ADDRESS				
CITY-ST-ZIP TITLE	COCONUT GROVE FL 331	DELETE	2 11		ST-ZIP		<u>-</u>	7 Change	Addition
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NAME SERVE ADDRESS	CARROLL-HILL, KIMBERLY	A		_	I ADDRESS				
STREET ADDRES	3560 MAIN HIGHWAY COCONUT GROVE FL 331	22			1				
CITY-ST-7IP TITLE	COCONOT GROVE FL 331	OS □ DELETE	3 1 7		ST-ZiP			7 Change	☐ Addition
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	K)				ST-ZIF				
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C(TY-ST-2)P					ST-ZIP				
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CITY-ST-ZIP					ST-ZIP				
TiTLE		☐ DELETE	<b>6</b> . 1 1	$\overline{}$			[	Change	Addition
NAME		_	6.2 N	IAME					
STREET ADDRES	ss I		6.3 5	TREE	T ADDRESS				
CITY-ST-ZIP					ST-ZIP				
	reby certify that the information supplie	d with this filing is voluntarily				for the exemption stated in Section 119	.07(3)(k), Flo	riga Statu	ites. I further

Too nereby certify that the information supplied with this tiling is voluntarily furnished and does not qualify for the exemption stated in Section 119.05 (s)(x), notices stated in Section 119.05 (s)(x), notices 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 early 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.

SIGNATURE:

Ami/10, 1996 305-494-7111