

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000087193 (7)

1. Corporation Name  
HOSE AND ACCESSORIES, INC.



Principal Place of Business

110 RAILROAD AVE  
HAINES CITY FL 33844  
US

Mailing Address

110 RAILROAD AVE  
HAINES CITY FL 33844  
US

3. Date Incorporated or Qualified  
12/17/1993

3a. Date of Last Report  
04/10/1995

2. Principal Place of Business

2a. Mailing Address

21 8530 Me Junkin Rd  
Suite, Apt. #, etc.

26 P.O. Box 60  
Suite, Apt. #, etc.

4. FEI Number  
59-3224888

Applied For  
Not Applicable

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

22 City & State

27 City & State

23 Eaton Park, FL  
Zip Country

28 Eaton Park, FL  
Zip Country

24 33840 25 USA

29 33840 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAIL, CHARLIE  
110 RAILROAD AVE.  
HAINES CITY FL 33844

81 Name

Charlie Dail

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

83

4425 Dail Rd

84 City

Lakeland

FL

85 Zip Code

33815

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

*Charlie Dail*

(If 13b Registered Agent, signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	DAIL, CHARLIE	
STREET ADDRESS	810 RAILROAD AVE.	
CITY-ST-ZIP	HAINES CITY FL 33844	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		DELETE
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		DELETE
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		DELETE
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	Change	Addition
1.2 NAME	Dail, Charlie		
1.3 STREET ADDRESS	4425 Dail Rd		
1.4 CITY-ST-ZIP	Lakeland, FL 33813		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Signature Phone #

CRE034 (12/95)