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

PROFIT CORPORATION ANNUAL REPORT



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

1996

P94000016773 (1) **DOCUMENT #**

1. Corporation Name

r. a. J	HANSPUKI, INC.									
Principa! Place	of Business	Mailing /	Address				t 100/100/ FFE (DIFF DIGIC DUFF) POLI	ABIII DAIAI II	OSON OSKOT ENDO	FF 18900 1111 1801
2431 N.E. 3RD AVE. OGALA FL 34470			N.E. 3RD AVE. A FL 34470							
							3. Date incorporated or Qualified 03/03/1994		of Last F 4/21/19	
	ace of Business	2a. Mailii	ng Address				4. FEI Number			Applied For
21		26				· · · · · · · · · · · · · · · · · · ·	59-3222270			Not Applicable
Suite, Apt 22		27	ə, Arit. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State	9	h	& State				6. Election Campaign Financing		\$5.0	0 May Be
ZID	Country	28		1			Trust Fund Contribution			d to Fees
24]	Country 25	29 Zip		Cou	ntry		8. This corporation has liability for i	3.7	ax under s	199.032,
24	9. Name and Address of Curr		Agent	30			Florida Statutes Yes 10. Name and Address of New R	No	Acont	
			3411		B1	Name	IV. Haine and Address of New H	chistateo .	- Seut	
ଖାଫା	FRANCIS W									
2431 N.E. 3RD AVE.					82	Street Add	eet Address (P.O. Box Number is Not Acceptable)			
	FL 34470				83					
					84	City		FL	85 Z	ip Code
SIGNATURE	th, and accept the obligations of, Se Signative typed or protection electromateurs ag	त क्रांची गांध ते जुक्काद्रको	. ;NO:		Ağısı	i sagriari en rocijien	ed wher her state gi	DATE		
12.	D OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFI			
NAME	GUGEL, FRANCIS W		☐ DELETE	1 1 1				L] Change	☐ Addition
STREET ADDRESS	2431 N.E. 3RD AVE.			12 N4						
	OCALA FL 34470					ADDRESS				
CITY - ST - ZIP TITLE	D		DELETE	14 CI 2 1 TI		I - Z;P			7 66	FT 120
NAME	GUGEL, JANE E		_ весете	2 2 NA		i		L	Change	Addition
STREET ADDRESS	2431 N.E. 3RD AVE.					MONDOGO				
CITY - ST - ZIP	OCALA FL 34470					ADDRESS 1.300				
TITLE		•	DELETE	2 4 CI 3 1 TI		1 - 215		Г	Change	Addition
NAME			_	3 2 NA				L		
STREET ADDRESS						ADDRESS				
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NAME				4 2 NA	ΜĒ			_		-
STREET ADDRESS				4 3 ST	BEET.	ADDRESS				
CITY - ST - ZIP				4.4 CI	Y-S1	I - ZIP				
TITLE			DEFELE	5 1 TI	TLE]	Change	Addition
NAME				5 2 NA	ME					
STREET ADDRESS				5351	HEE I	ADDRESS				
CITY - ST - ZIP				5 4 Ci	Y-51	r - ZIP				
TITLE			DELETE	6.11	LE			Ľ] Change	Addition
NAME				€2NA	MĒ					
STREET ADDRESS				6 3 S1	REFLA	ADURESS				
CITY - ST - ZIP				6.4 CH	Y - ST	1-216				

14. I do horoby 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 of on an attachment with an address.

SIGNATURE:

SUGNATURE AND TYPED OF PRINTED NAME OF PIGNING OFFICER OF DIRECTOR E. GUGEL #26/96