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

PROFIT CORPORATION ANNUAL REPORT **1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

FILED

Feb 21 1997 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000025931 (4)

HT/BH, INC.

1111 S. ORANCE AVE. 4TH FL ORLANDO FL 32806 2. Principal Place of Business 2. A Maring Address 2. Principal Place of Business 2. A Maring Address 3. Date Incorporated or Qualified 3. Date of Last Report 04/05/1994 4. FEI Number 5. Sy-323306.1 Mot Applied 5. Sy-323306.1 Mot Applied 5. Sy-323306.1 Mot Applied 5. Sy-323306.1 Mot Applied 6. Certificate of Status Desired \$5-75 Additions 7. Fee Required 7. Pee Required 7. Date Name and Address of Current Registered Agent 7. Name and Address of Current Registered Agent 7. Pee Required 7. Name and Address of New Registered Agent 7. Pee Required 7. Name and Address of New Registered Agent 7. Pee Required 7. Name and Address of New Registered Agent 7. Pee Required 7. Name and Address of New Registered Agent 7. Pee Required 7. Name and Address of New Registered Agent 7. Name and Address (P.C. Box Number is Not Acceptable) 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Na					· · · · · · · · · · · · · · · · · · ·				
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2. Principal Place of Business 2. Mailing Address 4. FEI Number Applied For Not Applied Suite. April #, cite. Street Address of Election Compaign Financing Trust Fund Contribution Fee Required - St. 50.00 May 8 Added to Fees Street Address of Country St. 70 Name and Address of Current Registered Agent St. 70 Name and Address of New Registered Agent Name and Addres						3. Date Incorporated or Quali		and the second second	port
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Surie. Apt. #, citc. Surie. Apt. #, citc.	2. Principal Pl	lace of Business					•	 	
City & State Zip Country Zip Country Zip Country Zip Country B. This corporation has liability for inlangible tax under 6. 199,036 Florida Statutes 9. Name and Address of Current Registered Agent HANSON, HARLAN L 1111 S. ORANGE AVE., 4TH FL ORLANDO FL 32808 83 64 City FL 85 Zip Code City State City State City State Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code City State City State City State City State DATE		Al ala			<u></u>	59-3233061			
City & State City & State City	¬ '	#, Q[C.			·	5. Certificate of Status Desire	d 💭	T	
Trust Fund Contribution									
9. Name and Address of Current Registered Agent HANSON, HARLAN L 1111 S. ORANGE AVE., 4TH FL ORLANDO FL 32806 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purposition of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purposition as one of changing its register of dice 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 register of agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE D	23		28					Added to	o Fees
9. Name and Address of Current Registered Agent HANSON, HARLAN L 1111 S. ORANGE AVE., 4TH FL ORLANDO FL 32806 82 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 register of or registered agent, or both, to that State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registery agent. I am tamiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Let D NAME HANSON, HARLAN L 12 NAME 1047 SWEETWATER RD 11. SIRRET ADDRESS 11. Let D 12. VIV. ST. ZP 11. Let D 12. Change 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ACITY-ST. ZP 15. TAMPA FL 33618 22 NAME 14. ACITY-ST. ZP 16. Change 17. ACITY ST. ZP 17. ACITY ST.	Zip	·		ļ,	У		y for intangible	tax under s.	199.032,
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ORLANDO FL 32806 83 R4 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 register 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, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature spect or ported name or registered agent and title of applicable (NOTE Registered Agent signature registered Agent signat									
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 register of fice 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 register agent and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature Specific princes name of registered agent and title applicable (NOTE: Registered Agent signature required when relutating) DATE				82	Street Add	ress (P.O. Box Number is Not Acc	eplable)	•	
TI. 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 register 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 register agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature typest or period name of registered agent and life of applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILLE D	ONL	ANDO FL 32000		83	3				
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CITY-ST-ZIP 14. I do 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	NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	NEW SMYRNA BEACH FL 32 D BELLOMO, FRANK 3333 PELHAM RD ORLANDO FL 32803	☐ DELETE	4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY- 6.1 TITLE 6.2 NAME 6.3 STREI	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS			Change	Addition