FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 APR 28 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000031261 (8)

1. Corporate Name
H & W ENTERPRISES OF TAMPA, INC.

Principal Place of Business: 5142 W IDLEWILD AVE, TAMPA FL 33634

Mailing Address: 5142 W IDLEWILD AVE, TAMPA FL 33634

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/10/1994

3a. Date of Last Report:

4. FEI Number: 65-0523423 — 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

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. # etc. 27
City & State 23	City & State 28
Zip 24 / Country 25 USA	Zip 29 / Country 30

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WHITE, ROLLIN K
5142 W IDLEWILD AVE
TAMPA FL 33634

10. Name and Address of New Registered Agent

81 Name: ~~GARRETT, HOWARD L~~
82 Street Address (P.O. Box Number is Not Acceptable): ~~3314 HENDERSON BLVD STE 208~~
83
84 City: ~~TAMPA~~ FL 85 Zip Code: ~~33602~~

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 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 ~~HOWARD L. GARRETT~~ — Date ~~4/24/95~~

12. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	WHITE, ROLLIN K
STREET ADDRESS	5142 W IDLEWILD AVE
CITY-ST-ZIP	TAMPA FL 33634
TITLE	DSV
NAME	WHITE, DIANA I
STREET ADDRESS	5142 W IDLEWILD AVE
CITY-ST-ZIP	TAMPA FL 33634
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Six blank entries, each with TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, ☐ Change ☐ Addition)

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)(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 with an address.

SIGNATURE: Diana I. White — 4/23/95 — 813-886-1399

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0301861 CP