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

PROFIT CORPORATION ANNUAL REPORT 1996 PROFIT FLORIDA DEPARTMENT OF S Sandra B Morthian Secretary of State DIVISION OF CORPORATIO			B Morthan ry of State					
1. Corporation	MENT # P9400 H HAMPTON INDUSTRIES,	0046579 (6) Inc.			A INCAINAL ING MALIA NAMA	.	ālāl ā ālās Not	(I (48 44 1 8 () 148)
	of Business NEE AVENUE FL 34243-1930	Mailing Address 353 SUWANNEE AVENUE SARASOTA FL 34243-1930			i saariaar die lakki Aldik A	DIA DETIE DOLLE DELIE		II todio in if (Do)
					Date Incorporated or Qui 06/22/1994		ate of Last R 05/01/19	
	ace of Business 6474 AJE W	2a. Maling Address 26 604 6474	AVE W		El Number 65-0510483	<u> </u>		Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. C	Pertificate of Status Desi			Additional
City & State		Orty & State			lection Campaign Finan	oing _	Fee	Required May Be
23 BRAD A	ENTON FL Country	28 BRAJENTO.	Country		rust Fund Contribution		Adde	d to Fees
24 3420		29 34207	30 U S A	Fi	his corporation has liabi lorida Statutes lame and Address of	Yes □ No		199.032,
1436 45 BRADEN	GE, FRANCIS L TH AVENUE CIRCLE WEST #13 ITON FL 34207		83 84 City	Address (P.O. 4 64	A. HAMP. Box Number is Not Ac Y TH AVEN	ceptable) UE WE	_ 2	p Code 4207
or registere familiar with SIGNATURE	o trie provisions of Sections 607,0502 ad agont, or both, in the fittate of Florid in and accept the oblightions of Section	on 607.0505, Florida Statutes.	, the above-hamled of Liby the colporation's √√ A HAM	orporation sub board of direc 1970 N	nmits this statement for licturs. I hereby accept the	e appointment a	hanging its r is registered	egistered office agent I am
12.	OFFICERS AND		Fedgisteral A. et signature 13.	···	tariaj DDITIONS/CHANGES TI	OFFICERS AN	ID DIRECTO	PRS IN 12
TIFLE	P Hampton, David A	☐ DELETE	1 1 T.TL*	P	ron, PAVID		Change	RS IN 12 9 Addition
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6 4 CHY ST-2IP

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trusted en powered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if ordanged, or on an attachment with an address.

SIGNATURE:

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