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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000057682 (4)

HIBBERT & BERRY MANUFACTURING, INC.

FILED Apr 16 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		1 100(1106) 110 30(11 6301) 00(11 00(11 00))	at aster samte årter thirk tillt ibli
3882 S. LK ORLANDO PKWY	3882 S. LK. ORLAND	O PKWY.		
ORLANDO FL 32908	ORLANDO FL 32808 US		DO NOT WRITE IN T	HIS SPACE
	-		3. Date Incorporated or Qualified	
			08/04/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3260402	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State			Fee Required
23	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	untry Zip	Country	8. This corporation owes or has paid the	
24 25	29	30	Personal Property Tax due June 30.	Yes No
g, Name and Ad	dress of Current Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
BERRY, GERALD 8				
3882 S. LK. ORLANDO PKWY. ORLANDO FL 32808		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
		83		
		63		
		84 City		EL 85 Zip Code
11. Pursuant to the provisions of S	Sections 607.0502 and 607.1508, Florida St	atutes, the above-named con	poration submits this statement for the purpo	se of changing its registered
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, a careful the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE CALLULA	ut J.a. Hibbe	2.1	4	-10.98
	name of registered agent and title if applicable	NOTE Registered Agent signature requ	_	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
THILE P	☐ DELETE	1.1 TITLE		Change Addition
HAME HIBBERT, JOHN		1.2 NAME		
	BA CIUCITE 10063 HIPYI		. (1)	Įį
CITY-ST-ZIP ORLANDO FL	32836 DELETE	1.4 CITY-ST-ZIP		
NAME BERRY, GERAL	-	2.1 TITLE		☐ Change ☐ Addition ☐
	PRLANDO PARKWAY	2.2 NAME		
CITY-ST-ZIP ORLANDO FL	NEMICO FARMIAT	2.3 STREET ADDRESS	••	· .
TITLE	DELETE	2.4 CITY-ST-ZIP 31 TITLE	***************************************	Change Addition
NAME		32 NAME		Change nuonit()
STREET ADDRESS		3 3 STREET ADDRESS		
CITY - ST - ZIP		3 4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		,
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CiTY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-SI-ZIP		5 4 CITY-ST-ZIP		
TITLE	DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY, CT. 7ID				

14. I 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; 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.

4-10-98

352-8886