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

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State
03-16-1999 90134 042 ***150.00

DOCUMENT # **P94000057682**

1. Corporation Name
HIBBERT & BERRY MANUFACTURING, INC.

Principal Place of Business	Mailing Address
3882 S. LK ORLANDO PKWY ORLANDO FL 32808 US	3882 S. LK. ORLANDO PKWY. ORLANDO FL 32808 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 08/04/1994

2. Principal Place of Business	2a. Mailing Address
21 10063 HIGHLAND WOODS CT	26 10063 HIGHLAND WOODS CT
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 ORLANDO FL	City & State 28 ORLANDO FL.
Zip 24 32836 Country 25 ORANGE	Zip 29 32836 Country 30 ORANGE

4. FEI Number: 59-3260402. ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BERRY, GERALD 3882 S. LK. ORLANDO PKWY. ORLANDO FL 32808	81 Name: HIBBERT JOHN 82 Street Address (P.O. Box Number is Not Acceptable) 83 10063 HIGHLAND WOODS CT 84 City: ORLANDO FL 85 Zip Code: 32836

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: PRES. JOHN HIBBERT — 2-14-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HIBBERT, JOHN 10063 HIGHLAND WOODS CT ORLANDO FL 32836	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VP CAMILLA S. HIBBERT 10063 HIGHLAND WOODS CT. ORLANDO FL 32836	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BERRY, GERALD 3882 S LAKE ORLANDO PARKWAY ORLANDO FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: JOHN HIBBERT PRES. — 2-14-99 — 407 352-8886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #