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

PROFIT CORPORATION ANNUAL REPORT

1997



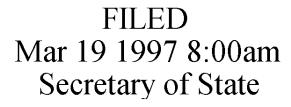
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400083780 (4)

HUBER & HUBER, INC.





WIND COMMISSION OF THE COMMISS									
Principal Place of Business Mailing Address						1 (4 DEFORE 310 (800) DEBTE ROLL DATE 8404)		BIRK MBAT (MAT	
2013 SANFOR SANFORD FL		2013 SANFORD AVENUE SANFORD FL 32771-4530							
						3. Date Incorporated or Qualified 11/10/1994	3a. Date of Last 04/22/1996	.,	
	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For	
21		26				59-3282021 Not Applicable			
Suite, Apt		Suite, Apt #, etc.	27]			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Sta	ate	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	<u> </u>		Coun	itry	This corporation has liability for the higher tax affacts. 150.002,		s. 199.032,		
24	[25]	[29]	[30]	J		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Current	i Hegistereo Agent		31	Nema	10. Name and Address of New Reg	Istered Agent		
	BER, STEVEN A.			?'	Name				
	3 SANFORD AVE		1	32	Street Addre	et Address (P.O. Box Number is Not Acceptable)			
SAI	NFORD FL 32771		8	33					
			Ē	34	City		FL 85 Zi	p 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 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.								its registered as registered	
SIGNATURE	Signature, typed or printed name of teg stered agen	it and title if appropria	L: Registered a	Agent	signal re require	d when reinstaling)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	DRS IN 12	
TITLE	PD	☐ DELETE	E 1.1 311LE			THE RESIDENCE OF THE PROPERTY	☐ Change	Addition	
NAME	HUBER, STEVEN A		1.2 NAME						
STREET ADDRESS	· · · · · · · · · · · · · · · · · ·		1.3 S1R	1.3 STREET ADDRESS					
CITY-ST-ZIP			1.4 CITY	/-ST-	71P				
TITLE			2.1 HHL	E			☐ Change	Addition	
NAME	HUBER, ROBERT M		2.2 NAME					i	
STREET ADDRESS	2013 SANFORD AVENUE		2.3 STREET ADDRESS		DORESS				
CITY-ST-ZIP	SANFORD FL 32771		2. 4 CHY-S1-7IP		7IP				
TITLE		DELETE		3 1 1IILE			☐ Change	: Addition	
NAME	3 2 N		3.2 NAM	I F					
STREET ADDRESS			3 3 STRE	IET AD	DDRESS				
CITY-ST-ZIP		34.0			2IP		·····		
TITLE		☐ DELETE	4 1 111LF				∐ Change	: Addition	
NAME	1		4 2 NAA						
STREET ADDRESS			4.3 STREET ADDRESS		DORESS.				
CITY-ST-ZIP		T DELETE	4.4 CHY		21P				
TITLE		☐ DELETE	5.1 1311				∟ Change	Addition	
NAME		5.2 NA							
STREET ADDRESS	1				DURESS				
CITY-ST-ZIP		5.4 Cl			ZIP			Amaritan	
TITLE		DELETE 6.17					Change	Addition	
NAME			6.2 NAM						
STREET ADORESS	i i			6.3 STHEFT ADDRESS					
CITY-ST-ZIP	<u> </u>	· graph promote many parameters	G.4 CITY	- 51-	719	0			

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the eport is true and accurate and that my signature shall have the same legal effect as if made under eath; that ✓ empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name