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 # P94000085836 (2)

HEW ENTERPRISES, INC.

Principal Place of Business

Mailing Address

714 E ORANGE STREET APOPKA FL 32703 714 E ORANGE STREET

FILED Jun 11 1997 8:00am Secretary of State



APOPKA FL 32	2703	APOPKA FL 32703-4443			
				3. Date Incorporated or Qualified 11/22/1994	3a. Date of Last Report 05/01/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 33CX			Dinter Gar	den <u>59-3280343</u>	Not Applicable
	087	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	ce, Fr	City & State	i	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Zip 34-	76/ 25 Orange	29 34761 3	Country Orange	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
, , , , , , ,	9. Name and Address of Current I			10. Name and Address of New Re	gistered Agent
APOPKA FL 32703 81 Name Street Str				nillio Hew Address (P.O. Box Number is Not Acceptal ROO Old Winter Cou	orden Rd #2007
	\$ - * .		84 City (coee	FI 85 Zip Codo
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 a 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 the state of the obligations of Section 697,0506, Florida Statutes. SIGNATURE					
į.	Sign De, typed or printed name of registered agent a		togistered Agent signature		DATE
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD ANTHONY A	₩ DELETE	1.1 HTLE	PVS Providence 1642	☐ Change 🔀 Addilion
NAME	HEW, ANTHONY A 714 E ORANGE STREET		1.2 NAME	Phillip Hew 3000 Old Winter (bourden Rd #2021
STREET ADDRESS	APOPKA FL 32703		1.3 STREET ADDRESS	Ucose, FC 34761	-
CITY-ST-ZIP TITLE	VSD	▼ DECETE	1.4 C(1)Y - S1 - Z(P 2.1 1)TLE	Lacter 10 o 1101	Change Addition
NAME	HEW, JENNIFER E	V DECCIE	2.2 NAME		Change Caronion
STREET ADDRESS	714 E ORANGE STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	APOPKA FL 32703		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 1016		☐ Change ☐ Addition
NAME	·		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-\$1-ZIP		
TITLE		☐ DELETE	4.1 TO LE		Change Addition
NAME			4. 2 NAME		·
STREET ADDRESS			4.3 STREET ADDRESS		_
CITY-ST-ZIP			4.4 CITY - ST - ZIP		4
TITLE		☐ DELETE	5.1 TITL€	W/W	Change Addition
NAME			5.2 NAME	V ,	/
STREET ADDRESS			5.3 STREET ADDRESS	"	5
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		<u> </u>
TITLE		☐ DELETE	6.1 TITLE	المنافق المنافق المنافق المنافق المنافق المنافق المنافق المنافق المنافقة ال	☐ Change ☐ Addition
NAME			G.2 NAME	70000221 -06/16/97010	
STREET ADDRESS			6.3 STREET ADDRESS	-86/16/97010	31U28
CITY-ST-ZIP			6.4 CITY - ST - ZIP	***165.00	

14. I do 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.

Maria Harana