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 # P9500001087 (2)

VAN HORN INDUSTRIES, INC.

FILED Mar 31 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										ı 18041001 işa talalı İlyili Al		OIN ODIN DI		120 MILL 1000 1004
4200 N FEI	DERAL HWY	4200	4200 N FEDERAL HWY											
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US	US			US				-	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
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2. Principal P	Place of Busin	05S	2a. Mai	ling Address					. FF	01/05/1995 El Number			$\neg \neg$	Applied For
21			26					1					-	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							65-0537-172				Additional	
22		27					5	5. C	ertificate of Status Desir	ed			Required	
City & Stat	te		City	& State				6	3. E	lection Campaign Finan	cina .	-	\$5.0	O May Be
23			28							rust Fund Contribution				d to Fees
Zip	L	Country	Zip		Cou	intry	1	8.), Tr	his corporation owes or	has pai	d the curr	ent year	Intangible
24 •		25	29		30					ersonal Property Tax du				□ No
	g, Name :	and Address of Current	Registered	Agent			r	10). N	ame and Address of N	ew Reg	istered A	gent	
	iorn, Jame					81	Name							
4200 N FEDERAL HIGHTYAY						82 Street Addr			P.O.	. Box Number is Not Ac	ceptabl	e)		
S	SUITE 114	/ / ^	. 1		L.,									
U	IGHTHOUSE	1	i	63										
		I = I + I	/			84	City						85 Zip	p Code
-11 5		10 / / / /	/									<u>FL</u>	1	•
office or r	to the provision registered age	ons of Sections 607 0502 ont, or both, in the State o n, and accept the doligati	and 607.15 Morida Si	i08, Florida Statu uch change was	ites, the al authorize	bove d by	e-named the corp	corporation s	on so boa	submits this statement for	or the pu	rpose of	changing	jits registered
agent. I a	m famil lar will	n, and accompt the doligati	ons of, Sec	tion 607.0505, F.	Jorida Stat	utes	3.				_1.			to registeree
SIGNATURE											393	93		
12.	Signature typed o	or provide name of regularized advise OFFICERS AND			TE: Registere:	d Age	int signature					DATE		
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CITY-ST-ZIP			\mathcal{D}		6.4 CIT	Y-ST	- 7IP							
14. I hereby co	ertify that the	information supplied with ropory or supplemental a	this tring d	loes not qualify to	or the exe	mpt	ion stated	d in Section	on 1	19.07(3)(i), Florida Stati	ites. I fu	rther cert	ify that th	e information
officer or o	director of the	corporation or the receive changed, or on an attach	er or trustee	empowered to	execute th	i ina Tis r	eport as t	rature sna required b	ы па by С	ave trie same legal effet Chapter 607, Florida Sta	as ir n tutes; ar	nade und nd that mi	ər oath; tř y name ar	nau am an ppears in
Riock 15 o	or block 13 if o	cnangod, or og∕arj∡átlachr	poent with a	n address.						•	-			

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