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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000017345 (6)

HOBO ENTERPRISES OF SANIBEL, INC.

FILED Apr 24 1997 8:00am Secretary of State



. 4/18/97 (941) W72 N.A.

						;
Principal Place of Business Mailing Address						
1833 HENDRY FORT MYERS I		1833 HENDRY ST. FORT MYERS FL 33901-3054				
					3. Date Incorporated or Qualified 03/02/1995	3a. Date of Last Report 04/29/1996
2. Principal F	Place of Business	2a. Maiting Address	2a. Mailing Address		4. FEI Number	Applied For
		26			65-0561695	Not Applicable
Suite, Apt. #, etc.		Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country		Coun	itry	8. This corporation has liability fo	
24	[25]	29	30			Yes No
****	9. Name and Address of Currer	ni Registered Agent		81 Name	10. Name and Address of New F	egistered Agent
SHIELDS, CHRISTOPHER J			[Mailie		Į.
	E GULF DR			82 Street	Address (P.O. Box Number is Not Acceptable)	
SAN	11BEL FL 33957		-	В3		
				B4 City		85 Zip Code
			İ			FL
agent. I a	am familiar with, and accept the oblig Signature, typod or printed name of registered age				d corporation submits this statement for the poration's board of directors. I hereby acc e required when releasing)	DATE
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 110	.F		Change Addition
NAME	MESSING, HOWARD		1.2 NA	ME		
STREET ADDRESS	% 1833 HENDRY ST.		1.3 STF	REET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33901			Y-ST-ZIP		
TITLE	DVST	DETETE	2 1 1111			☐ Change ☐ Addition
NAME	TRIVETT, ROBERT		2 2 NA			
STREET ADDRESS	% 1833 HENDRY ST. FORT MYERS FL 33901			FFT ADDRESS		
CITY-ST-ZIP	FUNT MIENS FL 33901	DELETE	2 4 C/	Y - S1 - 7IP		· Change Addition
TITLE NAME		E petite	3.1 HIII 3.2 NA			· C Glange Addition
STREET ADDRESS			ľ	VEET ADDRESS		
CITY-ST-ZIP	1			Y-\$1-7IP		
TITLE	 	DELETE	4.1 1111			Change Addition
NAME		_	4. 2 NA			-
STREET ADDRESS	•		4.3 S18	EET AUDRESS		
CITY-ST-ZIP			1	Y-ST-71P		
TITLE		DELETE	5.1 TITI			Change Addition
NAME			5.2 NA	ME		ĺ
STREET ADDRESS			5.3 \$TP	EF1 ADDRESS		
CITY-ST-ZIP		·	5.4 CH	Y - ST - ZIP		
TITLE		DELETE	61117	. E		Change Addition
NAME			6.2 NA	vtE		
STREET ADDRESS			63818	EE1 ADDRESS		
CITY-ST-ZIP			6.4 CI1	Y · S1 - ZIP	<u></u>	

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 if am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if opanies, or on an attachment with an address.