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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000020868 (2)

HALL ENTERPRISES-ORLANDO, INC.



г ппыра: гласе	of Business		M	alling Address					**** *****		
2317 CALLOWAY DR. ORLANDO FL 32810			2317 CALLOWAY DR. ORLANDO FL 32810								
								3. Date Incorporated or Qualified 03/15/1995	3a. Date	of Last R	eport
2. Principal Pla	ace of Busine	68	2a.	. Mailing Address				4. FEI Number			Applied For
21			26					59-3299 W5			Not Applicable
Suite, Apt.	#, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional Required
City & State	9			City & State			·	6. Election Campaign Financing		\$5.0	0 May Be
23			28					Trust Fund Contribution			d to Fees
<i>Z</i> ip 24		Country 25	29	Zip	30	ountry		This corporation has liability for Florida Statutes	intangible ta No	x under s	199.032,
- 1	9. Name	and Address of Curre	nt Regis	stered Agent				10. Name and Address of New	Registered	Agent	
2317 (FRANK CALLOWAY NDO FL 328					1	Street Add	FRANK H. HALL JR dress (P.O. Box Number is Not Accepta 317 CALLOWAY DA	<u>_</u>	-810 85 Z	p Code
11. Pursuant for register	to the provisio	ns of Sections 607.050	2 and 60	7,1508, Florida Stati	utes. the al	bove-na	amed corpo	pration submits this statement for the pu ard of directors. I hereby accept the app	rpose of cha pointment as	nging its registered	registered offici f agent. I am
tamiliar wi	ith, and accep	t the obligations of, Sec	1607	.0505, Florida Statut	es.				25	DR	96
familiar wi	ith, and accep	printed reme of registereo ages	nt and title if	applicate.	es. NOTE Register	ered Agent		red when reinstating)	25 DATE		
familiar wi SIGNATURE	ith, and accep	t the obligations of, Sec	nt and title if	application (es. NOTE Register	ered Agent			25 DATE FICERS AND	DIRECTO	ORS IN 12
SIGNATURE	Signature, typed o	printed remaind registered ages	nt and title if	applicate.	NOTE Register	ered Agent: 3. 1 TITLE		red when reinstating)	25 DATE FICERS AND		
SIGNATURE 12. TITLE NAME	Signature, typed o	printed remaind registered ages	nt and title if	application (NOTE: Register 13 1.	ered Agent 3. 1 TITLE 2 NAME	signature require	red when reinstating)	25 DATE FICERS AND	DIRECTO	ORS IN 12
SIGNATURE : 12. TILE NAME STREET ADDRESS	Signature, typed o	printed remaind registered ages	nt and title if	application (NOTE Register 13 1.1 1.2 1.3	9. 1 TITLE 2 NAME 3 STREET A	signature require	red when reinstating)	25 DATE FICERS AND	DIRECTO	ORS IN 12
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 logal effect as if made under out; 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 anyaddress.

SIGNATURE:

FRAN

FRANK H HALL J.

25 Dan 96

(401)660-0307

Daytime Phone #