

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mothman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000031722 (8)

1. Corporation Name

H & H OF TAMPA BAY, INC.



Principal Place of Business

5002 ADDISON CT.
TAMPA FL 33624

Mailing Address

5002 ADDISON CT.
TAMPA FL 33624

2. Principal Place of Business

21 JOFFREY'S COFFEE CO

State, Apt. #, etc.

22 UNIT #5

City & State

23 BRANDON, FL

Zip

Country

24 33511

25 HUS.

2a. Mailing Address

26 2492 W. BRANDON BLVD.

State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

g. Name and Address of Current Registered Agent

HASKINS, KIM
5002 ADDISON CT.
TAMPA FL 33624

3. Date Incorporated or Qualified

04/24/1995

3a. Date of Last Report

N/A

4. FEI Number

59-3324405

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0702 and 607.1506, 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 607.0702, Florida Statutes.

SIGNATURE

Kim Haskins

Print Full Name of Agent Submitting Statement

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

D
HASKINS, KERRY
5002 ADDISON CT.
TAMPA FL 33624

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

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39. STREET ADDRESS

40. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

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39. STREET ADDRESS

40. CITY, ST, ZIP

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SIGNATURE:

Charlotte Hooker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/19/96

(813) 251-5986

CR2E034 (12/95)