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

CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Mar 11 1998 8:00am						
Secretary of State						

EII ED

1. Corporatio	MENT # P95000 HIPS, INC.	0073958 (7)			HAIF INNO HAIFI BURL WIT DAT
10230 ATLANTIC BLVD. 102 #10 #10		Mailing Address 10230 ATLANTIC BLVD. #10 JACKSONVILLE FL 32225		DO NOT WRITE IN THIS	
				3. Date Incorporated or Qualified 09/25/1995	
2. Principal Place of Business 2a. Mailing Address 21		2a. Mailing Address		4. FEI Number 59-3335623	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	6	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the or	urrent year Intangible
24	9. Name and Address of Current		30[Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
10 #1 JA 11. Pursuant office or r	CKSONVILLE FL 32225	² and 607.1508, Florida Statule of Florida, Such change was at hons of, Section 607.0505, Flor	83 84 City s, the above-named corputhorized by the corporal	ress (P.O. Box Number is Not Acceptable) Flooration submits this statement for the purpose tion's board of directors. I hereby accept the approximately accept the accept the approximately accept	85 Zip Code of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed nan-o of registered ager	It and tele if applicable (NOTE	Registered Agent signature requi	red when reinstaling) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	DOUGLAS, JOHN D III 3131 UNIVERSITY BLVD., NO	RTH, APT. 26	1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32277 VSD	DELETE	1.4 CITY-ST-ZIP		☐ Change ☐ Addition
YITLE	PARKER, WINSOR W JR.	□ Dettit	2 1 TITLE 2.2 NAME		C. Cusuffe C. Mittingii I.
STREET ADDRESS	3540 HIDDEN LAKE DRIVE E	AST	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32256		2.4 CITY-ST-ZIP		ì
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		·
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME		L out it	4. 2 NAME		
STREET ADDRESS	!		4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CITY+ST-ZIP		1
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		.
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		☐ DELETE	5.4 CiTY-ST-ZIP		Change datasia
TITLE .		LJ DELEIK	6.1 TITLE		Change Addition
NAME STREET ADDRESS	l		6.2 NAME 6.3 STREET ADDRESS		ĺ
SINCEL NUMBOS			O STRILL ADDUCTOS		;

14. Thereby 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 eath; 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.