

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

**FILED**

**May 27 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # P95000081464 (6)**

**1. Corporation Name**  
*Stephanie Hordes, Inc.*

**Principal Place of Business** *1194 OLD DIXIE HIGHWAY #6 LAKE PARK, FL. 33403*  
**Mailing Address** *1194 OLD DIXIE HIGHWAY #6 LAKE PARK, FL. 33403*

**3. Date Incorporated or Qualified** *10/24/1995* **3a. Date of Last Report** *3/7/1996*  
**4. FEI Number** *65-0635339* **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**

**2. Principal Place of Business** **2a. Mailing Address**  
**21. Suite, Apt. #, etc.** **26. Suite, Apt. #, etc.**  
**22. City & State** **27. City & State**  
**23. Zip** **Country** **28. Zip** **Country**  
**24.** **25.** **29.** **30.**

**9. Name and Address of Current Registered Agent**  
*Stephanie Hordes  
1194 OLD DIXIE HIGHWAY #6  
LAKE PARK, FL. 33403*

**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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.**

**SIGNATURE** *[Signature]* **5/19/97**

**12. OFFICERS AND DIRECTORS**

<b>TITLE</b> <i>President</i>	<input type="checkbox"/> DELETE
<b>NAME</b> <i>HORDES, STEPHANIE</i>	
<b>STREET ADDRESS</b> <i>1194 OLD DIXIE HIGHWAY #6</i>	
<b>CITY-ST-ZIP</b> <i>LAKE PARK, FL 33403</i>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>11. TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>12. NAME</b>	
<b>13. STREET ADDRESS</b>	
<b>14. CITY-ST-ZIP</b>	
<b>21. TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>22. NAME</b>	
<b>23. STREET ADDRESS</b>	
<b>24. CITY-ST-ZIP</b>	
<b>31. TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>32. NAME</b>	
<b>33. STREET ADDRESS</b>	
<b>34. CITY-ST-ZIP</b>	
<b>41. TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>42. NAME</b>	
<b>43. STREET ADDRESS</b>	
<b>44. CITY-ST-ZIP</b>	
<b>51. TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>52. NAME</b>	
<b>53. STREET ADDRESS</b>	
<b>54. CITY-ST-ZIP</b>	
<b>61. TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>62. NAME</b>	
<b>63. STREET ADDRESS</b>	
<b>64. CITY-ST-ZIP</b>	

**7000002203437**  
**-06/05/97--01121--005**  
**\*\*\*165.00**

**14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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. 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, changed, or on an attachment with an address.**

**SIGNATURE:** *[Signature]*

*4/24/97*