

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

10/2

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

97 SEP -5 AM 10:55

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



DOCUMENT # P95000096485 (4)

1. Corporation Name  
H W & M INSPIRATION CORP, INC.

Principal Place of Business  
7421 W. CYPRESS HEAD DRIVE  
PARKLAND FL 33067

Mailing Address  
7421 W. CYPRESS HEAD DRIVE  
PARKLAND FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/18/1995	3a. Date of Last Report 03/15/1996
4. FEI Number APPLIED FOR NA	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> 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	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent  
TURNER, OTHEL  
3741 W. BROWARD BLVD  
SUITE 201  
FORT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent
81 Name Othel Turner
82 Street Address (P.O. Box Number is Not Acceptable) 5787 W. SANDRINE BLVD
83
84 City Fort Lauderdale FL 85 Zip Code 33312

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, Section 607.0505, Florida Statutes.

SIGNATURE Othel Turner (NOTE: Registered Agent signature required when installing) DATE 9/7/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURRAY, HAGNE	1.2 NAME	700002287997--0
STREET ADDRESS	7421 W. CYPRESS HEAD DRIVE	1.3 STREET ADDRESS	-09/09/97--01026--003
CITY-ST-ZIP	PARKLAND FL 33067	1.4 CITY-ST-ZIP	***165.00 ***165.00
TITLE	VST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURRAY, HAGNE	2.2 NAME	
STREET ADDRESS	7421 W. CYPRESS HEAD DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PARKLAND FL 33067	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE [Signature] DATE 9/15/97

CR2E034 (4/97)

20/2

**OTHEL TURNER & CO.**

ACCOUNTANTS  
5787 WEST SUNRISE BOULEVARD • HUMANA PLAZA  
PLANTATION, FLORIDA 33313  
(954) 583-2205 FAX: (954) 321-0532

August 15, 1997

Division of Corporations  
Annual Report Section  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Hermitage Investments, Inc.

This letter is written as a request for abatement of the \$385.00 late fee due to reasonable cause, as requested by your office.

The taxpayer never received your original notice and had no knowledge of the filing requirements.

Herewith enclosed are check in the amount of \$165.00 each; for Hermitage Investments, Inc., and HW&M Inspiration Corp, inc.

Please file accordingly and abate the late fee.

Sincerely,



Othel Turner  
For Mr Hagne Murray