

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

FILED

**May 05 1997 8:00am
Secretary of State**

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000022117 (1)

1. Corporation Name
HYDRA IMPORTS, INC.



Principal Place of Business
**4135 DAVENTRY LANE
PALM HARBOR FL 34685**

Mailing Address
**4135 DAVENTRY LANE
PALM HARBOR FL 34685-1127**

3. Date Incorporated or Qualified
03/08/1996

3a. Date of Last Report

4. FEI Number
59-3370522

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BROWN, DIANNE
4135 DAVENTRY LANE
PALM HARBOR FL 34685**

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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, DIANNE	
STREET ADDRESS	4135 DAVENTRY LANE	
CITY-ST-ZIP	PALM HARBOR FL 34685	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, BARRY S	
STREET ADDRESS	4135 DAVENTRY LANE	
CITY-ST-ZIP	PALM HARBOR FL 34685	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DECAS, PENELOPE	
STREET ADDRESS	5 CHURCHILL AVENUE	
CITY-ST-ZIP	WAREHAM MA 02571	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GRIM, DAVID	
STREET ADDRESS	5 CHURCHILL AVENUE	
CITY-ST-ZIP	WAREHAM MA 02571	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.8 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.8 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.8 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.8 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.8 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.8 STREET ADDRESS	
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

[Handwritten signatures]

CR2E034 (9/96)