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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000031462

GRIFFITH & HILLMAN, INC.

Principal Place of Business Mailing Address					- I (Militar the litte fills blus desit desit desit	3 114B1 11B11 B1010 B	.HICE HOU 1981
11920 31ST COURT N. 11920 31ST COURT N.							
ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716							
U\$ U\$					DO NOT WRITE IN THIS	S SPACE	
					3. Date Incorporated or Qualifed 04/10/1996		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	App	olied For
21 26					59-3372445	Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	dditional	
22				5. Certificate of Status Desireo	Fee Req	quired	
	City & State City & State				6. Election Campaign Financing	\$5.00 A	Мау Ве
23	28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Ir		_
24	25	29 30	<u></u>		Personal Property Tax.	<u>-</u>	No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
GRIFFITH, JAMES			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
3901 HELENA ST. N.E.				Ou bei Addire	you () . O. Ben Hamber to Hotel Belgins,		
, ST. F	PETERSBURG FL 33703		83			1 (13.1)	H C T 187
						85 Zip C	oda 1111
			84	City	FI	85 Zip Ci	ode
orfice or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered ager	of Florida. Such change was auth- tions of, Section 607.0505, Florida	orized by Statutes	the corporatio	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint the purpose of the purp	r charging its i	istered
12.	OFFICERS AND DIRECTORS 13			_	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	P DELETE 1.1		1.1 TITLE			☐ Change	☐ Addition
NAME	GRIFFIITH, JAMES		1.2 NAME				
STREET ADDRESS	3901 HELENA STREET N.E.		1.3 STREE	TADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33703		1.4 CITY-S	T- ZIP			
TITLE			2.1 TITLE			☐ Change	☐ Addition
NAME	22N		2.2 NAME				
STREET ADDRESS			23 STREE	TADDRESS			
_			2. 4 CITY-5				
CITY-ST-ZIP TITLE			3.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Change	Addition
NAME			3.2 NAME				
1.0377				T ADDRESS			,
STREET ADDRESS	Mark Control		3.4. CITY-5		,		
CITY-ST-ZIP			4.1 TITLE	51-ZIP		Change	Addition
TITLE		_ >====	4. 2 NAME				_
NAME				TADDDEEA			
STREET ADDRESS	(* '			TADDRESS			
C/TY-ST-ZIP		☐ DELETE	4.4 CITY-S	1-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		•	CT change	
NAME				TADDDECO			
STREET ADDRESS				TADDRESS			Ì
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY-S	I-ZIP			Addition
TITLE	W. 4	☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME	1			

14. I 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 planged, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90025 034 ***150.00