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

**PROFIT CORPORATION** ANNUAL REPORT

1998

CITY-ST-ZIP

Diesel deal



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000099842 (2)

THE FOUR HUMOURS, INC.

Mailing Address Principal Place of Business ATTN: RICHARD GRAHAM ATTN: RICHARD GRAHAM 18080 DORAL DRIVE 18060 DORAL DRIVE DO NOT WRITE IN THIS SPACE FORT MYERS FL 33912 FORT MYERS FL 33912 3. Date Incorporated or Qualified 01/01/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0720449 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GRAHAM, RICAHRD 18060 DORAL DRIVE Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33912 83 84 City 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 little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition Change DELETE 1.1 TITLE TITLE PTD GRAHAM, RICHARD 1.2 NAME NAME 18060 DORAL DRIVE 1.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33912 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change TITLE **VSD** 2.1 TITLE NAME **GRAHAM, BARBARA M** 2.2 NAME 18060 DORAL DRIVE 2.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33912 2. 4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 31 TITLE TITLE 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP 5.4 CITY - ST - ZIP Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME **6.3 STREE1 ADDRESS** STREET ADDRESS

6.4 CITY - ST - ZIP

4/28/98

(941) 433-5094

14. 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.

Richard Graham