Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90142 022 ***150.00

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 # P97000019455

H & H LIGHTING, INC.

Principal Place of Business Mailing Address							· DIEST BIJET BITT TOOL
269 ODOMS MILL BLVD PONTE VEDRA BEACH FL 32082 269 ODOMS MILL BLVD PONTE VEDRA BEACH FL 32082		X82		DO NOT WOLT	IN THE SPACE	-	
				DO NOT WRITE IN THIS SPACE			=
					3. Date Incorporated or Qualifed		}
					03/03/1997		1
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	-	Applied For
21					59-3437962	#0	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			_		5. Certificate of Status Desired		.75 Additional ee Required
City & State City & State					6. Election Campaign Financing		i.00 May Be
23 28 28					Trust Fund Contribution	Ad	ded to Fees
Zip	Country 25	Zip 30	Country	1	 This corporation owes the current Personal Property Tax. 	t year Intangible ☐ Yes	
24	9. Name and Address of Current	_ 	' 		10. Name and Address of New Re	gistered Agent	
3. Hallie and Addiese of Callett Hegiets - 2 - 3				Name			
sipkovsky, steven f.				Stroot Add	ress (P.O. Box Number is Not Acceptabl	<u></u>	
269 ODOMS MILL BLVD			82	Street Addi	Tess (F.O. Box Number is Not Acceptable		
PONTE VEDRA BEACH FL 32082			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			1.1 TITLE			☐ Ch.	
NAME	SIPVOSKY, STEVEN F.		1.2 NAME				
STREET ADDRESS	269 ODOMS MILL BLVD			TADDRESS			
CITY-ST-ZIP	TOUR LINE DA DELOUI EL COCCO		1.4 CITY-5				
TITLE	P	☐ DELETE	2.1 TITLE			□ Ch	ange Addition
NAME	GREEN, SCOTT A.		2.2 NAME				}
STREET ADDRESS	153 BEAR PEN		2.3 STREE	TADORESS			
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		2.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		_	☐ Ch	ange Addition
NAME	-	·	3.2 NAME		•		}
STREET ADDRESS	,		3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			□ Ch	ange
NAME	•		4.2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			ļ
CITY+ST-ZIP			4.4 ÇITY- S	T-ZIP	******		
TITLE		☐ DELETE	5.1 TITLE			□ Ch	ange
NAME			5.2 NAME				}

CITY-ST-ZIP 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 of 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 all other like empowered.

5.3 STREET ADORESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Change

☐ Addition