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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000048010 (7)

HALLMARK DECKING, INC.

FILED Apr 27 1998 8:00am Secretary of State

|--|

Principal Plac	be of Business	Mailing Address				{	H ab i ibili Forb i il	
,		· ·	•					
2216 HOWAR TAMPA FL 33		2216 HOWARD LAN TAMPA FL 33612	E					
77441 71 TC 94	~	77100171 F ##47F				DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualified		
o Cincinal F	Diagonal Dunings	2a. Mailing Address				05/22/1997 4. FEI Number	- 1 1	pplied For
2. Principal F	Place of Business	26 26				59-8464170		lot Applicable
Suite, Apt	#. etc.	Suite, Apt #, etc	2.					Additional
22		27				5. Certificate of Status Desired		lequired
City & Stat	te	City & State	· · · · · · · · · · · · · · · · · · ·			Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution	Added	to Fees
— ^{Ζιρ}	Country	Ζ ιρ	· -	untry		8. This corporation owes or has paid the		
24	25 25 Name and Address of Cui	[29]	30	1		Personal Property Tax due June 30. 10. Name and Address of New Registere		No
		Tellt Hegisteles Ageill		81	Name	IO. Traine and Addition of their inglister.	, a rigain	
	ZQUEZ, STEVEN W							
	0 N TAMPA ST STE 2700 MPA FL 33602			82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
'^	MFA FL 33002			83				
					Oth.		les Zin	Code
				84	City	F	L 65 Zip	Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida S	Statutes, the a	bove	-named corpo	ration submits this statement for the purpose	of changing	its registered
office or agent. I s	registered agent, or both, in the St am familiar with, and accept the ob	tate of Florida, Such change: bligations of, Section 607.050	was authorize 05, Florida Sta	tutes	tne corporatio	on's board of directors. I hereby accept the a	ippointment a	s registered
SIGNATURE								
	Signature typied or printed name of registered			ed Agei	nt signature requirer			50 11 40
12.	·	AND DIRECTORS DELET	13. E 1.1 TI	ITI E		ADDITIONS/CHANGES TO OFFICERS A	Change	
TETLE	D THEOREM ADMOUD	☐ DCCC	1.1 ti				C. J Onlings	₽ Noomon
NAME REPORT ADDRESS	THIESSEN, ARNOLD 2216 HOWARD LANE		B i		ADDRESS			
STREET ADDRESS CITY-ST-ZIP	TAMPA FL 33612		B	ITY-SI				
TITLE	TAMPA PE 33012	☐ DELET			1-211		Change	Addition
NAME			2.2 N	LAME				
STREET ADDRESS								
CITY-SI-ZIP			238		ADDRESS			
				TREET	ADDRESS			
TITLE		DELET	2.40	TREET CITY-S			Change	Addition
		DELET	2.40	TREET City-s				Addition
TITLE		DELEY	2. 4 C TE 3.1 TI 3.2 N	TREET CITY-S TILE IAME				☐ Addition
TITLE NAME		DELET	2.40 IE 3.1 TI 3.2 N 3.3 S	TREET CITY-S TILE IAME	ADDRESS		Change	
TITLE NAME STREET ADDRESS		☐ DELET	2. 4 C TE 3.1 TI 3.2 N 3.3 S 3.4 C	CITY-S CITY-S ITLE IAME STREET	ADDRESS			☐ Addition
TITLE NAME STREET ADDRESS DITY-ST-ZIP			2. 4 C TE 3.1 TI 3.2 N 3.3 S 3.4 C	CITY-S TILE IAME STREET CITY-S	ADDRESS		Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			2. 4 C TE 3.1 TI 3.2 M 3.3 S' 3.4 C TE 4.1 TI 4.2 M	CITY-S ITLE IAME STREET CITY-S ITLE NAME	ADDRESS		Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELET	2.4 C TE 3.1 TI 3.2 M 3.3 S 3.4 C 4.1 TI 4.2 M 4.3 S 4.4 C	CITY-S ITLE IAME STREET CITY-S ITLE NAME STREET CITY-S'	ADDRESS ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			2.4 C TE 3.1 TI 3.2 N 3.3 S 3.4 C 1.1 TI 4.2 N 4.3 S 4.4 C	CITY-S ITLE IAME STREET CITY-S ITLE NAME STREET CITY-SITLE	ADDRESS ST-ZIP		Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELET	2.4 C TE 3.1 TI 3.2 M 3.3 S 3.4 C 4.1 TI 4.2 M 4.3 S 4.4 C	CITY-S ITLE IAME STREET CITY-S ITLE NAME STREET CITY-SITLE	ADDRESS ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELET	2.4 C TE 3.1 TI 3.2 N 3.3 S' 3.4 C TE 4.1 TI 4.2 N 4.3 S 4.4 C TE 5.1 TI 5.2 N	CITY-S ITLE IAME STREET CITY-S ITLE NAME STREET CITY-S ITLE	ADDRESS ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP		☐ DELET	2.4 C TE 3.1 TI 3.2 N 3.3 S 3.4 C TE 4.1 TI 4.2 N 4.3 S 4.4 C TE 5.1 TI 5.2 N 5.3 S 5.4 C	CITY-S	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS		☐ Change☐ Change☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELET	2.4 C TE 3.1 TI 3.2 N 3.3 S 3.4 C TE 4.1 TI 4.2 N 4.3 S 4.4 C TE 5.1 TI 5.2 N 5.3 S 5.4 C	STREET CITY-S TITLE LAME STREET CITY-S STREET	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELET	2.4 C E 3.1 Ti 3.2 N 3.3 S 3.4 C E 4.1 Ti 4.2 N 4.3 S 4.4 C E 5.1 Ti 5.2 N 5.3 S 5.4 C E 6.1 Ti 6.2 N	TREET CCITY-S TITLE NAME STREET CCITY-S TITLE NAME STREET CCITY-SITLE NAME STREET CCITY-SITLE VAME STREET CTITY-SITLE VAME STREET CTITY-SITLE VAME VAME VAME VAME VAME VAME VAME VAM	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		☐ Change☐ Change☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE		☐ DELET	2 4 C IE 3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N 4.3 S 4.4 C IE 5.1 TI 5.2 N 5.3 S 5.4 C IE 6.1 TI 6.2 N 6.3 S	TREET CCITY-S TITLE NAME STREET CCITY-S TITLE NAME STREET CCITY-SITLE NAME STREET CCITY-SITLE VAME STREET CTITY-SITLE VAME STREET CTITY-SITLE VAME VAME VAME VAME VAME VAME VAME VAM	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS		☐ Change☐ Change☐ Change	Addition

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 attrictiment with an address

SIGNATURE:

4-20-98