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

PROFIT CORPORATION ANNUAL REPORT

1998



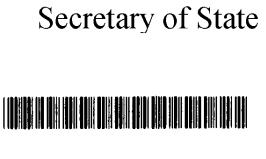
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State* *
DIVISION OF CORPORATIONS

DOCUMENT # P97000052067 (0)

HETON CORPORATION



FILED

Jul 31 1998 8:00am

Principal Place 3949 4 - WILLH	M ODURO PARK-BLVD .	Mailing Address 38404 WILLIAMSBURG PAI JACKSONVILLE FL 39957	WILLIAMSBURG PARK BLVD.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1300			Jose B	vd	DO NOT WRITE IN THE	S SPACE	
*Toroki and	illas (Jacksonville	E 20	រន្តមា	3. Date Incorporated or Qualified 06/12/1997		
2 Principal Pl	ace of Business	2a. Mailing Address	1		4. FEI Number	Apr	plied For
21 9283		26 9283·2 Sa	nJose t	3110	59-3521417		Applicable
Suite, Apt. :	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Red	
City & State 23 Tacksonville FL 28 Tacksonville			FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	o Fees
Zip 32	Country	$\frac{Z_{0}}{3}$ 3.257 3	Country A		This corporation owes or has paid the of Personal Property Tax due June 30.		ingible No
	9. Name and Address of Current Re				10. Name and Address of New Registers	d Agent	
UC	C FILING & SEARCH SERVICES IN	C	[81 Na	ne			
526 EAST PARK AVENUE			82 Str	et Addre	dress (P.O. Box Number is Not Acceptable)		
TA.	LLAHASSEE FL 32301		83				
			24 00			. 85 Zip C	lodo.
			84 Cit		F		
11. Pursuant t	o the provisions of Sections 607.0502 ar	nd 607 1508, Florida Statutes	, the above-nar	ned corpo	oration submits this statement for the purpose	of changing its	registered
agent. I a	egistered agent, or both, in the state of the rating and accept the abilityation	ns of Section 607.0505, Flori	da Statutes.	жированс	on's board of directors. I hereby accept the a	- 11 19	rogisterou
SIGNATURE	Kit Ifile	~ //	Registered Agent sign		O_f	21/	8
12,	Storature, typed or printed name of registered agent an OFFICERS AND D		Registered Agent sign	ature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12
TITLE	PDS	DELETE	1.1 TITLE	\neg		☐ Change	Addition
NAME	HETSLER, ROBERT G JR		1.2 NAME				
STREET ADDRESS	.891 ORANGEWOOD ROAD		1.3 STREET ADOR	.ss			
CITY-ST-ZIP	JACKSONVILLE FL 32259		1.4 CITY-ST-ZIP	-		Chann	Laddition
TITLE	VD	☐ DELETE	2.1 TITLE	VV	Michael Noughton 83-2 San Jose Blvd	Change	Addition
NAME	NAUGHTON, MICHAEL *8640-4-WILLIAMSBURG-PARK B	mro.	2.2 NAME	- 425	23-2 Son Jose Blvd		
STREET ADDRESS	JACKSONALLE FL 32257	MENTS	2.3 STREET ADDRI ■ 2.4 CITY-ST-ZIP	SS TOUG	acksonville, Fl. 32257		
CITY-ST-ZIP	SD SD	Detrite	3.1 TITLE	100	WIN VICK 3D	Change	Addition
NAME	VICK, DAVID R	<u></u>	3.2 NAME	"	D LIL DN#INIO	<i>y</i>	
STREET ADDRESS	100 FAIRWAY PARK BLVD. #17	11	3.3 STREET ADDR	ss 1.70	00 S. San Pablo RD #1019		
CITY-ST-ZIP	PONTE VEDRA BEACH FL 3208	2	3 4. CITY - ST - 2HP	5a	cksonville, F1, 32224	/_	
TITLE		☐ DELETE	4.1 TiTLE		•	Cylange	Addition
NAME			4. 2 NAME			< 17	/ >/
STREET ADDRESS	•		4.3 STREET ADDR	.SS		101/	3/
CITY-ST-ZIP		T DOLLAR	4.4 CITY-ST-ZIP			Change	Addition
TITLE		DELETE	5.1 TITLE		400002606 3 -08/04/98010031	24	
NAME			5.2 NAME			01 9	
STREET ADDRESS			5.3 STREET ADDR 5.4 CITY-S1-ZIP	.00	***550.00		
CITY-ST-ZIP THILE		DELETE	6.1 TITLE			Change	Addition
NAME		- Parent	6.2 NAME			. •	
STREET ADDRESS			6.3 STREET ADOR	iss			
CITY-ST-ZIP			6.4 CITY+ST+ZIP			_	
D111 Q11-E11					O III AND ARIAND FILL OF DELICION I CONTROL		

14. Thereby 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 en an attachment with an address.

11/14/100