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

PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # 1. Corporation Name



P97000064078

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90083 046 ***150.00

TODD H	UGHES, INC								
Principal Place	e of Business	Mailing Add	ress		_		- 1 (361(96) 118 1911) 1881) 68111 88111 88111 68110 81111 88111 88111 1881 -	BI 18() (48)	
1224 PARK LABELLE FL 33		1224 PARK LABELLE FL 33935					DO NOT WRITE IN THIS SPACE		
				•			3. Date Incorporated or Qualifed 07/22/1997		
2. Principal Pl	lace of Business	2a. Mailing Address					4. FEI Number Appli	ed For applicable	
Suite, Apt.		Suite, A	pt. #, etc.	*:			5. Certificate of Status Desired Fee Requ	ired	
City & State		City & State					6. Election Campaign Financing Trust Fund Contribution \$5.00 M Added to		
Zip 24	Country Zip 29			Country			8. This corporation owes the current year Intangible Personal Property Tax.		
9. Name and Address of Current Registered Agent					Mana	10. Name and Address of New Registered Agent			
HUGHES, CHARLES TODD 1224 PARK 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)					ess (P.O. Box Number is Not Acceptable)				
	PARK ELLE FL 33935								
		٠.			84	City	FL 85 Zip Co	de	
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, typhwor printed fame of registered agent and tube it approached. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS ANI	DIRECTORS		13.		 ,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
TITLE	DELETE			1.1 TE	ΠE		☐ Change	☐ Addition 3	
NAME STREET ADDRESS	HUGHES, CHARLES TODD 1224 PARK			ł	1.3 STREET ADDRESS			Š	
CITY-ST-ZIP	LABELLE FL 33935			1.4 CI	TY-ST	-ZIP			
TITLE				2.1 TI	TLE		☐ Change	Addition C	
NAME STREET ADDRESS				2.2 N/ 2.3 ST		ADDRESS			
CITY-ST-ZIP				2.4 C	:ПY-\$1	r-ZIP			
TITLE			DELETE	3.1 TI	TLE	}	Change	Addition	
NAME	•			3.2 N	AME.				
STREET ADDRESS				3.3 S	TREET	ADDRESS		İ	
CITY-ST-ZIP		·		3.4. C	ITY-S1	-ZIP			
TITLE			☐ DELETE	4.1 TI	TLE]	Change	Addition	
NAME				4, 2 N	iame	({	
STREET ADDRESS				4.3 S	TREET	ADDRESS			
CITY-ST-ZIP				4.4 C	ITY-ST	ZIP			
TITLE	,		DELETE	5.1 औ	TLE		Change	☐ Addition	
NAME)			5.2 N		}	•		
STREET ADDRESS				5.3 S	TREET	ADDRESS			
CITY-ST-ZIP				5.4 C	πY-ST	-ZIP			
TITLE	·		DELETE	6.1 TI	TLE		☐ Change	☐ Addition (

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 arn 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS