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 #

P97000082375 (1)

HOWL TOO, INC.

Principal Place of Business

Mailing Address

FILED Apr 01 1998 8:00am Secretary of State



13103 MULBERRY PARK DRIVE SUITE 8110 ORLANDO FL 32821				13103 MULBERRY PARK DRIVE SUITE 8110 ORLANDO FL 32821						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/23/1997			
2. Principal Place of Business 5495 W. Irlo Bronson Hwy.					2a. Malling Address					4. FEI Number		oplied For	
[21]				26						59-3486783		ot Applicable	
Suite, Apt. #, etc.					Suite, Apt #, etc.							Additional equired	
City & State 23 Orlando, FL				City & State								May Be to Fees	
Zıp	Country				Zip Cou			, _	8. This corporation owes or has paid the current year Intangit				
24 3474					29 30			Personal Property Tax due June 30. Yes X No					
g, Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent 81 Name					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD							81	148	ane				
12 PL				Street Address (P.O. Box Number is Not Acceptable)									
							83						
							84	Čit	ty	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													
12.	Signature, typed		registered agent a ICERS AND I				slered Age	nt sign	nature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRE	ČTOE	O IN 12	
TITLE	D	Urr	ICE NO MAD	DINECT	DELETE		.1 TITLE		Τ	P/T G		X Addition	
NAME	_	AN. COLIN				1	.2 NAME			Bowman, Colin			
							.3 STREET	ADOR	ESS	13103 Mulberry Park Dr., Suit	e 8	110	
CITY-ST-ZIP							.4 CITY-S		1	Orlando, FL 32821			
TITLE	311,5		·		DELETE		A TITLE	, <u>E</u> 1	_	□ c	ange	Addition	
NAME						2	2 NAME		}			1	
STREET ADDRESS						2	3 STREET	ADDR	ESS			ĺ	
CITY-ST-ZIP						2	. 4 CITY-5	ST-ZIP	.				
TITLE					DELETE	3	.1 TITLE				ange	Addition	
NAME						3	2 NAME		- 1			İ	
STREET ADDRESS	!					i a	3 STREET	ADDR	ESS			1	
CITY-ST-ZIP						3	.4 <u>CITY</u> - 5	37 - ZIP	<u></u>				
TITLE					DELETE	4	.1 TITLE			□ c	ange	Addition	
NAME						14	. 2 NAME)			1	
STREET ADDRESS						- 4	.3 STREET	ADDRI	ESS			1	
CITY-ST-ZIP						4	4 CITY - S	T-ZIP					
TITLE					☐ DELETE	5	.1 TITLE				ange	Addition	
NAME	I					5	2 NAME						
STREET ADDRESS						5	.3 STREET	ADDRI	ESS			1	
CITY-ST-ZIP	•					5	.4 CITY-S	T-ZIP			_		
TITLE					DELETE		.1 TITLE		T	CI CI	ange	☐ Addition	
NAME						6	2 NAME]	
STREET ADDRESS						6	.3 STREET	addri	ESS				
CITY-ST-ZIP							4 CITY-S		- 1			1	
	ertify that the	e information s	unphag with	this bli	lileup ton soon po					n Section 119 07/3/(i) Florida Statutes, I further certify the	at the	information	

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 supplyimental 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 receipter of th

Park Bruns / 3-19-