

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Jul 26, 1999 8:00 am**  
**Secretary of State**

07-26-1999 90002 013 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P98000093070

1. Corporation Name  
 ROBERT B. HOFFMAN LIMITED, INC.



Principal Place of Business: P.O. BOX 07132, FT. MYERS FL 33919  
 Mailing Address: P.O. BOX 07132, FT. MYERS FL 33919

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/02/1998

4. FEI Number: 65-0873130

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property:  Yes  No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-fields for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOFFMAN, ROBERT B  
 8908 BANYAN COVE CIRCLE  
 FT. MYERS FL 33919

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	P PRESIDENT
STREET ADDRESS		1.3 STREET ADDRESS	Robert B. Hoffmann
CITY-ST-ZIP		1.4 CITY-ST-ZIP	8908 Banyan Cove Circle FT MYERS FL 33919
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	VP VICE PRESIDENT
STREET ADDRESS		2.3 STREET ADDRESS	CATHERINE H. HOFFMAN
CITY-ST-ZIP		2.4 CITY-ST-ZIP	8908 BANYAN COVE CIRCLE FT MYERS, FL 33919
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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.

SIGNATURE: *Katherine Harris* 7-12-99 941-433-2418

CR2E034 (5/99)

PA 8000093070  
594957-90002-13

**Robert B. Hoffman Limited, Inc**  
**P.O. Box 07132**  
**Ft. Myers, FL 33919**  
**(941)433-2418**

July 12, 1999

Annual Reports Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

I recently received a 2<sup>nd</sup> notice to file the 1999 Profit Corporation Annual Report. I spoke with Mark Corbett at one of your offices today to tell him that I had never received the first notice.

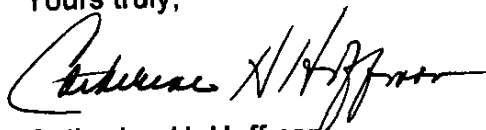
This is the first time I've ever incorporated a company and we did so on November 2, 1998. I was told that we would have to file an annual report but it wouldn't be due until the year following. We were surprised to receive a second notice especially since we never received a first one.

Mr. Corbett suggested that I send you the filing fee of \$150 and the completed report as soon as possible and also told me that it might have been possible because of our late incorporation date that we might not have received our first notice.

I would appreciate your consideration in this matter. I am writing a separate letter on behalf of the other corporation that we also incorporated on the same date for C & R Hoffman Limited, Inc. We have the same situation for that company as well.

Again, thank you for your help.

Yours truly,

  
Catherine H. Hoffman