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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 **DOCUMENT # S03782**

1. Corporation Name

HOWARD'S TV SERVICE, INC.

HOWARD'S TV SERVICE, INC.	·			,
incipal Place of Business	Mailing Address		·	
1-F NW 23 AVE	501-F NW 23 AVE		DO NOT WRITE IN THIS SPACE	
INESVILLE FL 32609	GAINESVILLE FL 32609 US		3. Date Incorporated or Qualifed	٦
i e	00			
			10/01/1990 4. FEI Number Applied For	] ;
Principal Place of Business	2a. Mailing Address		FO-2031710 Not Applicable	3 €
Fillicipal Class of the	26		———— MD. (3) Additional	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Ceruicale of Status 2000	= -
	City & State		6. Election Campaign Financing \$5.00 May Be	
City & State	<b>├</b> ──		Trust Fund Contribution Added to Fees	$\dashv$
Country		Country	8. This corporation owes the current year Intangible	- 1
Zip Country	29 30		Personal Property Tax.  10. Name and Address of New Registered Agent	コ
9. Name and Address of 0			<del></del>	
5. Name and Addison		81 Name		
BASS, KEVIN D.		82 Stree	et Address (P.O. Box Number is Not Acceptable)	
501 NW 23RD AVENUE	•	93		.
GAINESVILLE FL 32609		83		
		84 City	FI   1   1   1   1   1   1   1   1   1	
office or registered agent, or both, in the	e State of Florida. Such change was auto e obligations of, Section 607.0505, Florida	a Statutes.	ed corporation submits this statement for the purpose of changing its registere proporation's board of directors. I hereby accept the appointment as registered	1
agent. I am faithnar with, and devery			DATE	<u>.</u>
SIGNATURE	stered agent and title if applicable. (NOTE: Re	egistered Agent signatu	ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:	ition
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SIGNATURE Signature, typed or printed name of registration OFFICI	stered agent and title if applicable. (NOTE: Re	egistered Agent signatu	ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:	2 lition
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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 informatic 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 13 if changed, or on an attachment with an address, with all other like empowered.

-28-99

**FILED** 

Feb 18, 1999 8:00am

**Secretary of State** 

02-18-1999 90043 045 \*\*\*150.00

352-372-63<u>01</u>