SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S0963

(0)

HAR-LEE WORLD, INC.

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FILED Aug 20 1998 8:00am Secretary of State

] 2401 0401 8401 0401 3401 1
Principal Place of Business Malling Address					- 1 10011010 101 00110 0110 0110 0110 1101 1101	A BIRTH BIRTH BIRTH BIRTH HORE
PO BOX 17775		PO BOX 17775				
JACKSONVILLE	_		JACKSONVILLE FL 32245-7775			
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
6 Dalasia al Di	lane of Dunings	2a. Mailing Address			10/29/1990 4. FEI Number	Applied For
<u> </u>	lace of Business	26 Planting Address	7 ~ ~		59-3036210	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Zip Country Zip		Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent	04	10. Name and Address of New Registered Agent 81 Name		
HARMON, LOWELL D.				Name		
2000 CORPORATE SQUARE BLVD				Street Addre	ess (P.O. Box Number is Not Acceptable)	
JACI	KSONVILLE FL 32216		83			
			00			
			84	City	F	85 Zip Code
44 5		0 4 007 4000 Florido C	tatutan the chaus	named sarnar	No. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	abancina ito registered
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.						
agent. I a	am fam iliar with, and accept the oblig	ations of, section 607.050	5, Florida Statutes	i .		
SIGNATURE .	Signature, typed or printed name of registered age	of and title if applicable	(NOTE: Registered A	nent signature regu	ulred when reinstating) DATE	
12.		ND DIRECTORS	13.	John Olgania Contra	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELET	E 1.1 TITLE			Change Addition
NAME	HARMON, LOWELL D.	Amad	1.2 NAME			-
STREET ADDRESS	2000 CORPORATE SQUARE E	BL .	1.3 STREET	ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-S1	-ZIP		
TITLE	D	DELET	E 2.1 TITLE			Change Addition
NAME	LEE, ROBERT R.		2.2 NAME			
STREET ADDRESS	2000 CORPORATE SQUARE E	3L	2.3 STREET	ADDRESS		
CITY-\$T-ZIP	JACKSONVILLE FL		2.4 CITY-S1	-ZIP	· · · · · · · · · · · · · · · · · · ·	** ·
TITLE		☐ DEFE	TE 3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP			3.4 CITY-S1	-ZIP		
TITLE		L_ DELET				Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET	1		
CITY-\$T-ZIP			4.4 CITY-S1	-ZIP		
TITLE		L DELE		İ		Change Addition
NAME			5.2 NAME	*DDDCCO		
STREET ADDRESS			5.3 STREET			
CITY-ST-ZIP		[7]	5.4 CITY-ST 6.1 TITLE	·ZIP		Change Addition
TITLE		☐ DELE.	-			Change Addition
NAME			6.2 NAME	ADDDESS		
STREET ADDRESS			6.3 STREET	t		
CITY-ST-ZIP	i		6.4 CITY-ST	-41F		

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 chapter, or on an attachment with an address.

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8/8/98

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