FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S54096** (0)

1. Corporation Name

HAYNES SERVICES, INC.

Principal Place of Business
8111 E GREENWOOD AVE
TAMPA FL 33604
US

Mailing Address
8111 E. GREENWOOD AVE
TAMPA FL 33604
US

3. Date Incorporated or Qualified: 05/20/1991

3a. Date of Last Report: 05/01/1995

4. FEI Number: 59-3067448 ☐ Applied For ☐ Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**

HAYNES, JEFFERY
4820 IVY COURT, 5-A
7609 SANIBEL CIR SOUTH
TAMPA FL 33617

10. **Name and Address of New Registered Agent**

81 Name: Jeffery Haynes
82 Street Address (P.O. Box Number is Not Acceptable)
83 7609 Sanibel Cir South
84 City: Tampa FL 85 Zip Code: 33637

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	DPV	☐ DELETE
NAME	HAYNES, JEFFERY	
STREET ADDRESS	7609 SANIBEL CIR SOUTH	
CITY-ST-ZIP	TAMPA FL	
TITLE	ST	☐ DELETE
NAME	HAYNES, JEFFERY	
STREET ADDRESS	4820 IVY COURT, #5-A	
CITY-ST-ZIP	TAMPA FL	
TITLE	SEC.	☐ DELETE
NAME	Barbara Rasheed	
STREET ADDRESS	4411 Peidmont Rd	
CITY-ST-ZIP	Pensacola FL	
TITLE	TRE.	☐ DELETE
NAME	Howard Rasheed	
STREET ADDRESS	4411 Pedimont Rd	
CITY-ST-ZIP	Pensacola FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SEC/m	☐ Change ☒ Addition
1.2 NAME	Barbara Rasheed	
1.3 STREET ADDRESS	4411 Peidmont Rd	
1.4 CITY-ST-ZIP	Pensacola FL 32503	
2.1 TITLE	TRE./VP	☐ Change ☒ Addition
2.2 NAME	Howard Rasheed	
2.3 STREET ADDRESS	4411 Pedmont Rd	
2.4 CITY-ST-ZIP	Pensacola FL.	
3.1 TITLE		☐ Change ☒ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] 8/21/96 (813) 989-0800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)