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

Principal Place of Business

DRAYTON ISLAND BOX 19



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DIVISION OF CORPORATIONS

PURPLE HAZE ENTERPRISES, INC.

Mailing Address DRAYTON ISLAND BOX 19

(8)

Secretary of State 1998 DOCUMENT

FILED Jul 22 1998 8:00am Secretary of State



GEORGETOWN FL 32139 GEORGETOWN FL 32139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/22/1991 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3094921 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HAYES, DANIEL D. 284 DRAYTON ISLAND RD Street Address (P.O. Box Number is Not Acceptable) **GEORGETOWN FL 32139** 83 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 1.1 TITLE TITLE Change Addition DELETE NAME HAYES, DANIEL D. 1.2 NAME 284 DRAYTON ISLAND ROAD STREET ADDRESS 1.3 STREET ADDRESS **GEORGETOWN FL 32139** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 3.1 TITLE DELETE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE ___ Change ___ Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE] DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE Change TITLE DELETE 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.