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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S93924

(6)

HURM TAKE TWO, INC.

Mailing Address

May 19 1997 8:00am

Secretary of State

Principal Place of Business 6822 22ND AVE N ST PETERSBURG FL 33710		Mailing Address 6822 22ND AVE N 8T PETERSBURG FL 3371				
					3. Date Incorporated or Qualified 11/13/1991	3a. Date of Last Report 03/25/1996
		2a. Mailing Address	Address		4. FEI Number	Applied For
21		26	radi per address and a company		59-3090572	Not Applicable
Sulte, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & Stato		6. Election Campaign Financing	\$5.00 May Be
13		28	} ₁		Trust Fund Contribution Added to Fees	
Zip	Country	Zφ	Country		B. This corporation has liability for intangible tax under s. 199.032.	
24	25 29 3 9. Name and Address of Current Registered Agent			Florida Statutes Yes No 10, Name and Address of New Registered Agent		
AL ON	and the second s	ent negistered Agent	8.	Name	IV. Name and Address of New No.	Jistorgo Waur
ALONSO, JORGE F. 9714 121ST ST N						
	NOLE FL 34642		82	2 Street Add	Street Address (P.O. Box Number is Not Acceptable)	
J	1000		8:	3		
			84	1 City		85 Zip Code
				1 1		FL '
SIGNATURE					rporation submits this statement for the p ation's board of directors. I hereby accep	
12.	Signature, typed or printed name of registered in	agent and title if applicable (NC AND DIRECTORS	11. Hegislered A	gent signature req	uired when reinstating) ADDITIONS/CHANGES 10 OFFICE	DATE CERS AND DIRECTORS IN 12
TITLE	PID	DELITE	1.1 1011.6	T	, and the second	Change Addition
NAME	HURM, CAROLYN		1,2 NAME			
STREET ADDRESS	723 61ST AVE S		1.3 STRE	E1 ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		1,4 C/TY-	SI-71P		
TITLE	VSD	DELETE	2.1 DILE			Change Addition
NAME	HURM, ROBERT		2,2 NAMI			
STREET ADDRESS	723 61ST AVE S			ET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL	DELFTE	2, 4 CITY			Change Addition
TITLE		רַ טננונונ	3,1 TITLE 3,2 NAMI			El cusulte El Vacidou
NAME STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			3,4. CHY			
TITLE	□ DELF		4.1 101.6			Change Addition
NAME			4, 2 NAM	E		
STREET ADDRESS			4,3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 C(1)	- S1 - 2(P		
TITLE		DELETE	5 1 1111.6			Change Addition
NAME			5.2 NAMI		·	
STREET ADDRESS				E1 ADDRESS		
CITY-ST-ZIP		DELETE	540111		. A	Change Addition
TITLE		LJ DELETE	6 1 TITLE 6,2 NAM			Fin purelings Fin vocations
NAME CIDECT ADDRESS				ET ADDRESS		
STREET ADDRESS			6.3 STRE			
14. I do herel	by certify that the information such	lied with this filing does not au	ddy for the ex	remption stat	ed in Section 119.07(3)(i), Florida Statule	s. I further certify that the
informatio	on indicated on this annual report of	or supplemental annual report is for the receiver or trustee empo for on an attachtnent with an a	strue and accivered to exe	curate and th	at my signature shalf have the same lega ort as required by Chapter 607, Florida S	il effect as if made under oath; tha Statutes; and that my name