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



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(1)

Mailing Address

FILED Jul 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified

12/12/1991

HUBERT D. FORNER INTERIORS, INC.

956 MARIE C ORMOND BE	RRCLE ACH FL 32176	956 MARIE CIRCLE ORMOND BEACH FL 32176	
2. Principal	Place of Business	2a. Mailing Address	
21		26	
Suite, Ap	l. #, etc.	Suite, Apt. #, etc.	
22		27	
City & St	ate	City & State	
23		28	
Zip	Country	Zφ	Country
24	25	29 30	
	9. Name and Address of	of Current Registered Agent	
FO	RNER HURERT D		81 Name

956 MARIE CIRCLE **ORMOND BEACH FL 32176**

	59-3089527		Not Applicab
	5. Certificate of Status Desired	[_]	\$8.75 Additional Fee Required
	6. Flection Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
	This corporation owes or has p. Personal Property Tax due Jun Name and Address of New R	е 30.	Yes [No
Name			
Street Address	ess (P.O. Box Number is Not Acceptal	ole)	
City		FI	85 Zip Code

83 84 City

agent. Fa	an familiar with, and accept the obligations of, section (607 0505, Flor	ida Statutes.	
SIGNATORE	Signature, typed or product name of registered agent and the if applicable	(NOT	L. Registereo Agent signature requ	uired when reinstating) DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE.	D [DELETE	1 1 THLE	Change Addition
NAME	Fo r ner, Hubert D.		1.2 NAME	·
STREET ADDRESS	956 MARIE CIRCLE		13 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL		1.4 CH Y-ST-ZIP	
TITLE		DELETE	2 1 THEF	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-S1-ZIP			2.4 CITY-ST-ZIP	
TITLE		DELETE	3 1 71111	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3 4 CHY-ST-ZIF	
TITLE	[DELETE	4.1 THILE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STRLET ADDRESS	
CITY-ST-ZIP			4.4 CHY-ST-7IP	
TITLE	[DELETE.	5 1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		OELETE	6.1 TITLE	Change Addingn
NAME	, i		6 2 NAME	600002587406 -07/14/9801005009
STREET ADDRESS			6.3 STREET ADDRESS	-07/14/9801005009 \ \ \^\
City.91.7iP			6.4 CHV-\$1-7IP	***150.00 · 15

14. I hereby certify that the information supplied with this tiling 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 supplements appear report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I air an officer or director of the convergion of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 than field, or open attachment with an address.



Ormond Beach, Florida July 6, 1998

Division of Corporations Annual Report Filings P.O. Box 6327 Tallahassee, FI 32302-1500

Dear Sir or Madam:

We did not receive the 1998 Profit Corporation Annual Report packet at all and just recently received the 2nd Notice! We called the telephone number included in the 2nd Notice packet and were told to write this letter and include a check for \$150.00. We are following those instructions. Thank you.

Hubert D. Forner Interiors, Inc. 956 Marie Circle Ormond Beach, Fl 32176

FEI Number: 59:3089527

While I gone