FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY -1 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT

1995

DOCUMENT # V00600 (9)

1. Corporate Name

BRYANT HARDWARE, INC.

Principal Place of Business	Mailing Address
11697 GREENBRIAR CR. WEST PALM BEACH FL 33414	11697 GREENBRIAR CR. WEST PALM BEACH FL 33414

(E) NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification: 12/17/1991	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0300936	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. Does corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. # (if any) 22	Suite, Apt. # (if any) 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent

BRYANT, BILLY H., JR.
11697 GREENBRIAR CR.
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '[illegible]
TITLE	DP	☐ Change ☐ Addition
NAME	BRYANT, BILLY H., JR.	
STREET ADDRESS	11697 GREENBRIAR CR.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	DST	☐ Change ☐ Addition
NAME	BRYANT, SUSAN C.	
STREET ADDRESS	11697 GREENBRIAR CR.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I/We hereby certify that the information supplied with this report is true, accurate and complete as of the date of this report. I further certify that the information indicated on this report or supplemental 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 with an asterisk (*) or other designation indicating status as an officer.

SIGNATURE: Billy H Bryant Jr. BILLY H. BRYANT, JR. 04/25/95 407-925-5501

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING REPORT — Date — Daytime Telephone Number

0251910 CP

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CORPORATION ANNUAL REPORT
1995

DOCUMENT # V01316 (1)

1. Corporate Name
NEW SMYRNA TRAVEL, INC.

Principal Place of Business
301 FLAGLER AVE
NEW SMYRNA BEACH FL 32169

Mailing Address
301 FLAGLER AVE
NEW SMYRNA BEACH FL 32169

3. Date Incorporated or Qualified: 12/18/1991
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3096512 — 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

9. Name and Address of Current Registered Agent
TORRENCE, E. THOMAS
301 FLAGLER AVE
NEW SMYRNA BEACH FL 32169

10. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	TORRENCE, E. THOMAS
STREET ADDRESS	301 FLAGLER AVE
CITY-ST-ZIP	NEW SMYRNA BEACH FL
TITLE	ST
NAME	TORRENCE, E. THOMAS
STREET ADDRESS	301 FLAGLER AVE
CITY-ST-ZIP	NEW SMYRNA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

SIGNATURE: [signature] 4-28-95 904/427-3444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. Thomas Torrence

0012618 CP