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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V52276

(5)

1, Corporation	HITE, INC.	(-)				
INI O THI	IIIL; INO				e danak darana maka dalah alahk idada dalah	NI BIRNI BIRNI BIRNI BIRNI BIRNI BIRNI RABIL HRBI
Principal Place of Business Mailing Address						il Billit ander ander mider dillet deber somt
321 23RD STRE MARATHON FL	321 23RD STREET MARATHON FL 33050					
					3. Date Incorporated or Qualified	3a. Date of Last Report
					07/20/1992	04/19/1996
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4, FEI Number	Applied For
21 Suite Act # of:		26 Cuito Ant # 010	Suite, Apt. #, etc.		65-0343769	Not Applicable
Suite, Apt. #, etc.		 	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	1	8. This corporation has liability for	
24	25 9 Name and Address of Cu	rent Registered Agent	[30]		Florida Statutes 10. Name and Address of New R	Yes No
		Hell wedistored Wattr	61	Name	10. Hallie Bild Addiess of New H	egisteled Ageili
	te, martha j 23RD street					
MARATHON FL 33050			62	Street Addi	ddress (P.O. Box Number is Not Acceptable)	
BICH	ATTION 12 00000		83			
			84	City		85 Zip Code
		·		- 1		FL
11. Pursuant to office or reagent Tail	to the provisions of Sections 607, egistered agent, or both, in the S m familiar with, and accept the o	.0502 and 607.1508, Florida Stat Itate of Florida. Such change was bligations of, Section 607.0505, I	utes, the abov authorized b Florida Statute	e-named corp y the corporat s.	poration submits this statement for the tion's board of directors. I hereby according to the control of the con	purpose of changing its registered apt the appointment as registered
SIGNATURE	·		_			
Signature, typed or punted name of registered agent and fit e if applicable (NC				ent signature requi	red when reinstating)	DATE
12. TULE	PVS	DELETE DELETE	13. 1.1 TUTLE	·····	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	WHITE, MARTHA J		1.2 NAMÉ			
STREET ADDRESS	321 23RD STREET		1.3 STREE	T ADDRESS		
City-St-ZiP	MARATHON FL		1.4 CITY -	ST-ZIP		
THLE	TD	DELETE	2.1 TITLE			Change Addition
NAME	WHITE, MARTHA J		2.2 NAME	ŀ		
STREET ADDRESS	321 23RD STREET MARATHON FL		*	T ADDRESS		
Crity - ST - ZIP TITUE	MARKITION FL	DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
MAME	_ DELLIE		3.2 NAME			
STREET ADDRESS				T ADDRESS		
COTY - ST - ZIP			3.4. CITY-	ST-ZIP		·
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAMÉ			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY - ST - 7IP TITLE		DELETE	4.4 CITY - 5.1 TITLE	ST-ZIP		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			1	T ADORESS		
City -St - 701			54 CITY	1		
TITLE		DELETE	61 TITLE			Change Addition
NAME			62 NAME			
STREET ADDRESS			63 STREE	T ADDRESS		
CITY-ST-ZiP	an provide that the aforement of a	policed with this filing does not any	6.4 City-		d in Section 110 07/21/3\ Elevide Stated	tee I further certify that the
informatio Lam an of	n indicated on this annual report	or supplemental annual report is on or the receiver or trustee empt	s true and acc owered to exe	urate and that	d in Section 119.07(3)(i), Florida Statul t my signature shall have the same leg rt as required by Chapter 607, Florida	gat effect as if made under oath, that
appears (I SALVAN IS AS DIOON TO B DIRECTOR	a, or on an anaominon, with an a	50.000.		, ,	1