FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M26255** **(3)**

1. Corporation Name
HAH ENTERPRISES, INC.

Principal Place of Business
401 N.W. 38TH COURT. (ZIP 33126)
P. O. BOX 350940
MIAMI FL 33135

Mailing Address
401 N.W. 38TH COURT. (ZIP 33126)
P. O. BOX 350940
MIAMI FL 33135

3. Date Incorporated or Qualified: 01/22/1986
3a. Date of Last Report: 03/20/1995

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

4. FEI Number: 59-2637223 — 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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
LEWIN, PAUL
401 N.W. 38TH COURT
MIAMI FL 33126

10. Name and Address of New Registered Agent
81 Name: HAVENICK, FRED
82 Street Address (P.O. Box Number is Not Acceptable):
83: 401 NW 38th CT
84 City: MIAMI FL 85 Zip Code: 33126

11. 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: HAVENICK, FRED (Signature typed or printed name of registered agent and title, if applicable) Fred Havenick (Signature of registered agent) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	HECHT, FLORENCE	
STREET ADDRESS	401 NW 38TH CT.	
CITY-ST-ZIP	MIAMI FL	
TITLE	VTS	☑ DELETE
NAME	LEWIN, PAUL	
STREET ADDRESS	401 NW 38TH CT.	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	AMDUR, ISABELLE	
STREET ADDRESS	401 NW 38TH CT.	
CITY-ST-ZIP	MIAMI FL	
TITLE	DC	☑ DELETE
NAME	AMDUR, NEAL	
STREET ADDRESS	401 NW 38TH CT.	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	HAVENICK, BARBARA	
STREET ADDRESS	401 NW 38TH CT.	
CITY-ST-ZIP	MIAMI FL	
TITLE	DPE	☐ DELETE
NAME	HAVENICK, FRED	
STREET ADDRESS	401 NW 38TH CT.	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME	300001826883	
4.3 STREET ADDRESS	-05/20/96--01004--017	
4.4 CITY-ST-ZIP	***2461.25	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

5-1-96 JR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Fred Havenick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/9/96

Daytime Phone #: 3056493000

CR2E034 (12/95)