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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000002712 (6)

Country

9. Name and Address of Current Registered Agent

25

POMPANO BEACH FL 33069

STEINER, JEFF 2201 NW 30TH PL

SUITE A

H.A.S. INDUSTRIES, INC.

Principal Place of Business H.A.S. INDUSTIRES INC 2950 NW 27TH ST FT LAUEDERDALE FL 33311

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23 Zip

24

Mailing Address

2a. Mailing Address

29

2950 m

H.A.S. INDUSTRIES INC 2950 NW 27TH ST FT LAUDERDALE FL 3

10		
33311	DO NOT WRITE IN THIS SPACE	
	3. Date Incorporated or Qualified 01/06/1993	
 	4. FEI Number	Applied For
127454	65-0378005	Not Applicable
	5. Certificate of Status Desired	8.75 Additional Fee Required
POALE, FL		\$5.00 May Be Added to Fees
Country 30 Broward	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	10. Name and Address of New Registered Ager	nt
81 Name		
82 Street Addres	Street Address (P.O. Box Number is Not Acceptable)	
83		
84 City	FL 85	Zip Code

FILED

Feb 06 1998 8:00am

Secretary of State

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Addition TIT1 E SMALL LAWRENCE NAME 1.2 NAME 2950 NW 27TH ST 1.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-2IP CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP

14. Thereby certify that the Information supplied with this filing 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 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: