

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 # **P95000018065 (9)**

1. Corporation Name
HANNA COLLECTION, INC.



Principal Place of Business: **1628 PENNSYLVANIA AVENUE MIAMI BEACH FL 33139**
Mailing Address: **1628 PENNSYLVANIA AVENUE MIAMI BEACH FL 33139**

3. Date Incorporated or Qualified: **03/06/1995**
3a. Date of Last Report: **3/6/95**
4. FEI Number: **65-0566597**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **21 210 N. Coconut Lane**
22 City & State: **23 Miami Beach, FL**
24 Zip: **33139**
25 State: **Dade**
2a. Mailing Address: **26 210 N. Coconut Lane**
27 City & State: **28 Miami Beach, FL**
29 Zip: **33139**
30 State: **Dade**

9. Name and Address of Current Registered Agent: **GUTIERREZ, VALERIE W 1628 PENNSYLVANIA AVENUE MIAMI BEACH FL 33139**
10. Name and Address of New Registered Agent:
81 Name: **Gutierrez, Fernando**
82 Street Address (P.O. Box Number is Not Acceptable): **210 N. Coconut Lane**
83
84 City: **Miami Beach** 85 Zip Code: **FL 33139**

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	GUTIERREZ, VALERIE W	1.2 NAME	Gutierrez, Fernando
STREET ADDRESS	1628 PENNSYLVANIA AVENUE	1.3 STREET ADDRESS	210 N. Coconut Lane
CITY-ST-ZIP	MIAMI BEACH FL 33139	1.4 CITY-ST-ZIP	Miami Beach, FL 33139
TITLE	VSTD	2.1 TITLE	VSTD
NAME	GUTIERREZ, FERNANDO	2.2 NAME	Valerie Waidele-Gutierrez
STREET ADDRESS	1628 PENNSYLVANIA AVENUE	2.3 STREET ADDRESS	210 N. Coconut Lane
CITY-ST-ZIP	MIAMI BEACH FL 33139	2.4 CITY-ST-ZIP	Miami Beach, FL 33139
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	700001820087
TITLE		4.1 TITLE	-05/14/96--01046--006
NAME		4.2 NAME	***200.00
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Valerie Waidele Gutierrez* 3-7-96
SIGNATURE AND TYPED OR PRINTED NAME OF EACH OFFICER OR DIRECTOR: **Valerie Waidele Gutierrez**
305-674-0418

CR2E034 (12/95)