

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

AMENDED PROFIT CORPORATION ANNUAL REPORT 1997 \$61.25

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



FILED
 97 SEP 18 PM 1:55
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P96000100041
 1. Corporation Name
H.M.E. Sales & Service, INC.

Principal Place of Business Mailing Address
**20335 Biscayne Blvd,
 Aventura, FL 33180**

3. Date Incorporated or Qualified **12-11-96** 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address

21 **Dade** 26 **20335 Biscayne Blvd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

22 City & State 27 City & State
Aventura FL **Aventura, FL**

23 Zip 24 Country 29 Zip 30 Country
33180 USA **33180 USA**

4. FEI Number **65-0714529** 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

10. Name and Address of New Registered Agent

81 Name **Orlando Sigler**
 82 Street Address (P.O. Box Number is Not Acceptable) **20335 Biscayne Blvd.**
 83
 84 City **Aventura, FL** 85 Zip Code **33180**

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]* (Signature type or printed name of registered agent, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	President	<input checked="" type="checkbox"/> DELETE
NAME	Victor Citino	
STREET ADDRESS	10200 NW 5th	
CITY-ST-ZIP	Pembroke Pines, FL 33624	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Orlando Sigler	
13 STREET ADDRESS	10200 NW 5th	
14 CITY-ST-ZIP	Pembroke Pines, FL 33624	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

800002302798--2
-09/24/97--01102--011
*******61.25 *****61.25**

NS 9-22-97

14. I do hereby 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 9-11-97 (305) 935-1840
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)