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Mar 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 200090

(9)

1. Corporation Name

HARTOM CORPORATION

Principal Place of Business

1850 S TREASURE DR  
MIAMI BEACH FL 33141

Mailing Address

1850 S TREASURE DR  
MIAMI BEACH FL 33141-4343

3. Date Incorporated or Qualified

02/20/1957

3a. Date of Last Report

02/02/1996

4. FEI Number

59-6062473

Applied For

☒ Not Applicable

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 2699 Collins Ave

Suite, Apt. #, etc.

22 111

City & State

23 MIAMI BEACH

Zip

24 33140

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

TOMPKINS, LAURA  
1850 S TREASURE DR  
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name

Mitchell Martin

82 Street Address (P.O. Box Number is Not Acceptable)

2699 Collins Ave -111

83

84 City

MIAMI BEACH

FL

85 Zip Code

33140

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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/27/97

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME  
PC  
TOMPKINS, LAURA  
STREET ADDRESS  
1850 S. TREASURE DRIVE  
CITY - ST - ZIP  
MIAMI BEACH FL

TITLE ☐ DELETE

NAME  
PRESIDENT  
MITCHELL MARTIN  
STREET ADDRESS  
2699 COLLINS AVE -111  
CITY - ST - ZIP  
MIAMI BEACH FL 33140

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

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

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 if changed, or on an attachment to an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Laura Tompkins

2/27/97 (305) 864-5757

CR2E034 (9/96)