

FILED

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 304830 (3)
1. Corporation Name
H & H MIAMI DEVELOPMENT CORP.

**4850 GRANADA BLVD.
CORAL GABLES FL 33146**

Mailing Address
4850 GRANADA BVLD.
CORAL GABLES FL 33146

3. Date Incorporated or Qualified 05/04/1966	3a. Date of Last Report 04/09/1996
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2. Principal Place of Business	2a. Mailing Address
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21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
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22	City & State	27	City & State
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23	Zin	Country	28	Zin
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24 25 29

4. FBI Number	Applied For
59-1171316	Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

8. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution ☐ 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

ROGER, ARTHUR JOHN
4850 GRANADA BLVD
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81	Name	ARTHUR JOHN ROGER		
82	Street Address (P.O. Box Numbers Not Acceptable)	9844 N. KENDALL DR.		
83		APT. A-112		
84	City	MIAMI	FL	85 Zip Code 33176

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: William John Doyle '97

(NOTE: Registered Agent signature required when reinstating.)

11/0/97

12. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> DELETE
NAME	ROGER, HILDA H	
STREET ADDRESS	4850 GRANADA BLVD.	
CITY- ST- ZIP	CORAL GABLES FL	

TITLE	VS	<input type="checkbox"/> DELETE
NAME	ROGER, VINCENT A	
STREET ADDRESS	4850 GRANADA BLVD.	
CITY-STATE-ZIP	CORAL GABLES FL	

TITLE	V	<input type="checkbox"/> DELETE
NAME	ROGER, ARTHUR JOHN	
STREET ADDRESS	4850 GRANADA BLVD	
CITY-STATE-ZIP	CORAL GABLES FL	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☒ Change ☐ Addition

CORAL GABLES, FL 33146

3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	9844 N. KENDALL DR. APT. A-112
3.4 CITY - ST - ZIP	MIAMI, FL 33176

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST. - ZIP

5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> 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 of an attachment with an address.

SIGNATURE:

William John Kay REQUIRED
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97

305-661-0818

0518511

CR2E034 (9/96)