SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Corporation Name 320512

(7)

THE HARRIS COMPANY, INC.

FILED
Jul 15 1998 8:00am
Secretary of State



(20-)577HH

							JAIN BUTU ALAH TIBIL PURU ARAK JOOF	
Principal Place of Business Mailing Address								
1521 ALTON ROAD. \$-131 16100 N.E. 16TH AVENUE			_					
MIAMI BEACH FL 33139		NORTH MIAMI BEACH FL 33162						
						DO NOT WRITE IN 1	THIS SPACE	
						3. Date Incorporated or Qualified 08/31/1967		
9 Deinalant I	Place of Business	De Malling Address				4. FEI Number	A - tt - d F	
	Place of Business	2a. Mailing Address					Applied For	
21 Suite Act W ole		Suite Apt # ete				59-1209411	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State						
City & State		City & State				6. Election Compaign Financing	\$5.00 May Be	
23 Zin	Country	Zip Country				Trust Fund Contribution	Added to Fees	
Zip	Country 25	Zip	-	iliry		This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No	
24	9. Name and Address of Curren	t Projectered Agent	30			10. Name and Address of New Registe		
CICI		r Kegistereu Agent		81 N	ame	TV. Name and Address of New Augisto	an Whatt	
EISENBERG, DONALD			-	Traine				
	OO N.E. 16TH AVEENUE		ſ	82 S	treet Addres	s (P.O. Box Number is Not Acceptable)		
NO	RTH MIAMI BEACH FL 33162			83				
				0.3				
			Ì	84 C	ity		85 Zip Code	
						_	FL S Zip code	
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE: Register	red Agent	signature require	ed when reinstating) DA	TE	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12	
TITLE	P	DELETE	1.1 TIT	LE			Change Addition	
NAME	HARRIS, THERESE		1.2 NA	ME				
STREET ADDRESS	801 N. VENETIAN DR. PH E		1.3 STF	REET ADDI	RESS			
CITY-ST-ZIP	MIAMI FL 33139-1007		1.4 CIT	Y-ST-ZIP				
TITLE	DELETE 2.1 To		2.1 T(T	1 TITLE			Change Addition	
NAME			2.2 NA	ME	İ			
STREET ADDRESS	1		2.3 STF	REET ADDI	RESS			
CITY-ST-ZIP	E		2.4 CIT	Y-ST-ZIP	1			
TITLE		DELETE	3.1 TIT	LE			Change Addition	
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 STF	REET ADD	RESS			
CITY-ST-ZIP				Y-ST-Z(P				
TITLE		DELETE	4.1 TIT				Change Addition	
NAME		F-1 ptreit	4.2 NA				C CHRIST C HOOKUI	
STREET ADDRESS				REET ADDI	RESS			
CITY-ST-ZIP			1	Y-ST-ZIP				
TITLE		DELETE	5.1 TIT				Change Addition	
NAME	1		5,2 NA		·		LT CHANGE LT WOOKOU	
STREET ADDRESS				REET ADDI	DESS			
					ULOO			
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		L_] DELETE	6.1 TIT		ĺ		L Change L Addition	
NAME			6.2 NAI					
STREET ADDRESS				REETADDI	RESS			
CITY-ST-7ID	l .		E A CIT	V.ST.7ID	1			

14. I 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 with an address.

Thomas Defunde