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

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

(8)

H.F. MANUFACTURING OF FLORIDA, INC.

FILED Aug 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					. samm avan gerer voner natat state unt atell aleift atell, aleit biete filett felbt
3760 EAST 10TH COURT 3760 EAST 10TH COURT HIALEAH FL 33013-2920 HIALEAH FL 33013-2920					
MALEAN PL 33	U13-2 42 U	HIALEAH FL 33013-2920	HIALEAH FL 33013-2920		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					08/04/1975
2. Principal Place of Business 2a. Mailing /			ddress		4. FEI Number Applied For
21		26			NOT APPLICABLE Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired 38.75 Additional
22		27			Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	Zip Country		<u> </u>	Trust Fund Contribution Added to Fees
24	25	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
<u></u>	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
SCH	ENERLEIN, ROY M	Z	8	1 Name	
	SOUTHWEST 87TH COURT		-	2 0	Address (D.O. D. Aller)
MIAN			8	Z Stree	Address (P.O. Box Number Is Not Acceptable)
•••••	··· · · -		8	3	
				4 010	
			8	4 City	FL 85 Zip Code
11. Pursuant	to the provisions of sections 607.050	02 and 607.1508, Florida Statut	es, the abov	e-named	corporation submits this statement for the purpose of changing its registered
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 or printed name of registered age			Agent signal	ure required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VDP	DELETE	1.1 TITLE		Change Addition
NAME	JERROLD TUCKER		1.2 NAME		
STREET ADDRESS	112 WEST 34TH ST			TADDRESS	
CITY-ST-ZIP TITLE	NEW YORK NY 10120-0022	·	1.4 City-St-ZiP 2.1 TitlE		
NAME	BRUCE TUCKER	L_J DELETE	2.1 THE		Change Addition
STREET ADDRESS	112 WEST 34TH ST				
CITY-ST-ZIP	NEW YORK NY 10120-0022			T ADDRESS	
TITLE	14L11 TONK WI 10120-0022	DELETE	2.4 CITY-S		
NAME		[] VE£E1E	3.2 NAME		Change Addition
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			3.4 CITY-5		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		Light Change (Modition
STREET ADDRESS			4.3 STREE	TADDRESS	:
CITY-ST-ZIP			4.4 CITY-5		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		- Charge (Addition
STREET ADDRESS			5.3 STREE	T ADDRESS	
CITY-ST-ZIP			5.4 CITY-5	T-ZIP	
TIŢLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	TADDRESS	
CITY-ST-ZIP			6.4 CITY-S	T-ZIP	
an officer of	n triis annual report of supplemental	annual report is true and accu sceiver or trustee empowered to	rate and tha	t mv sian:	n section 119.07(3)(i), Florida Statutes. I further certify that the information ature shall have the same legal effect as if made under oath; that I am as required by Chapter 607, Florida Statutes; and that my name appears