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

Mar 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0) 572891 HILLS HARDWARE, INC. Principal Place of Business Mailing Address 2131 STIRLING RD 2131 STIRLING RD FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/16/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1859478 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 Trust Fund Contribution Added to Fees Country Ζip Country This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes ☐ No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name ROBERT A. BIAMONTE **2511 SW 58TH MANOR** 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33312 **B3** 84 City 85 Zip Code 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, lyped or protect name of registered agent and the if upply able (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (10<u>/</u>9) 13. TITLE DELETE 1.1 TITLE Change Addition BIAMONTE, ROBERT A. NAME 1.2 NAME 2131 STIRLING ROAD STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL. CITY-ST-ZIP 1.4 City - ST- ZIP Addition DELETE Change TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 THE 6.2 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

Mar 6,1998

Block 12 or Block 13 if change

SIGNATURE:

**FILED**