

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathan  
Secretary of State  
1995 STATE OF FLORIDA 1995

APPROVED  
AND  
FILED

DOCUMENT # **580368** (9)

CHAS. B. HART, JR., & ASSOC., INC.

08/15/1994 11:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

21 NW 126 AVENUE  
PLANTATION FL 33325

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PLANTATION FL 33325

DATE RECEIVED BY THE SECRETARY

3. Effective Date of Report	3a. Date of Last Report
07/26/1978	08/15/1994
4. FIC Number	Applied For / Not Applicable
59-1844084	
5. Certificate Status (Amended)	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7. The corporation has not filed the appropriate tax reports (1120-C, Florida Statutes)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

21. Filing Address	2a. Mailing Address
22. Date of Report	2b. Mailing Address
23. Filing Date	2c. Date of Report
24. Filing Date	2d. Filing Date

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GOODHART & ROSNER, P.A. 28 WEST FLAGLER STREET MIAMI FL 33130	B1 Name
	B2 Street Address (if City or Number is not Applicable)
	B3 City
	B4 State <b>FL</b> B5 Zip Code

11. The corporation certifies that the person(s) named in this report as the registered agent(s) for the corporation is/are qualified to accept service of process and that the corporation has authorized the person(s) named in this report to accept service of process on behalf of the corporation. I, the undersigned, hereby accept the appointment as registered agent for the corporation.

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (if any)
NAME: PD HART, CHARLES B., JR. ADDRESS: 6067 HOLLYWOOD BLVD HOLLYWOOD FL	1. NAME: [ ] Change [ ] Addition
	2. NAME: [ ] Change [ ] Addition
	3. NAME: [ ] Change [ ] Addition
	4. NAME: [ ] Change [ ] Addition
	5. NAME: [ ] Change [ ] Addition
	6. NAME: [ ] Change [ ] Addition
	7. NAME: [ ] Change [ ] Addition
	8. NAME: [ ] Change [ ] Addition
	9. NAME: [ ] Change [ ] Addition
	10. NAME: [ ] Change [ ] Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in section 119.06, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature is authentic. The agent's office file number under which this report is filed for the corporation is: The fee for this report is \$225.00. I, the undersigned, accept responsibility for this report as required by Chapter 117, Florida Statutes, and that my entire work is done in the State of Florida, except for any other state with which I am affiliated.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95