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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 639591

NATURES HANG-UPS, INC.

(7)

FILED Apr 07 1997 8:00am Secretary of State



Principal Place 7130 S.W. 171 MIAMI FL 331		Mailing Address 7130 S.W. 17TH TERRACE MIAMI FL 33155-1611							
						3. Date Incorporated or Qualified 10/15/1979	3a, Da 07/1	te of Last R 6/1996	eport
2. Principal	Place of Bus ness	2a. Mailing Address 26	tt trupy			4. FEI Number 59-1942479			oplied For of Applicable
Suite, Apt	t # etc.	Suite, Apt. #, etc.	h			5. Certificate of Status Desired			
City & Sta	ate	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24			30 Co	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent		104		10. Name and Address of New Re	gistered A	igent	
	LL, LUCRETIA JEANNE			81	Name				
	30 S.W. 17TH TERRACE AMI FL 33155				Street Add	ddress (P.O. Box Number is Not Acceptable)			
				83					_
				84	City		FL	85 Zip (Code
I office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change wa	s authoriza	ed ba	≀ the coroora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of of the appo	changing it pintment as	s registered registered
ordination.	Signature, typed or printed name of registered ag		OTE: Register	ed Age	uper erutarigia Ine	ired when reinstating)	DATE		
12.		ID DIRECTORS	13			ADDITIONS/CHANGES TO OFFIC	ERS AND		
THILE	PD	☐ DELETE	11	TITLE	- 1			Change	Addition
NAME	BELL, LUCRETIA JEANNE		1.21	NAME					
STREET ADDRESS			1.3	STREET	ADDRESS				
COTY - ST - 7IP	MIAMI FL		1.40	CITY-S	ST-2IP				
TITLE	VD	☐ DELETE	2.1	TITLE				Change	Addition
NAME:	BELL, JAMES DONALD		2.21	NAME					
STREET ADDRESS			2.3	STREET	ADDRESS				
CHY-ST-ZIP	MIAMI FL		2. 4	CITY-	ST-ZIP				
TILE	1	DELETE	3.1	TITLE			145	Change	Addition
NAME			3.21	NAME	ſ				
STREET ADDRESS	5		3.3	STREET	ADDRESS				
CHY-SI-ZIF					ST-ZIP	· · · · · · · · · · · · · · · · · · ·		.	
T-TLE		DELETE		T∤TL€	1			Change	Addition
NAMÉ NAMÉ			: 4.2	NAME	-				ļ
STREET ADDRESS	5		4.3	STREET	ADDRESS				
C(*Y-\$1-7)9		- Deirte		CITY - S	ST - ZIP	. · · · · · · · · · · · · · · · · · · ·		<u> </u>	
TIFLE		DELETE	1	TITLE		÷		Change	Addition
NAME				NAME					
STREET ADDRESS	·}		1		ADDAESS	•			}
CITY - ST - 7P				CITY-S	T-ZIP				
TITLE	İ	☐ DELETE		TITLE	1			Change	Addition
KAME				NAME					
STREET ADDRESS	·		6.3	STREET	ADDRESS				
CITY-S1-ZIP			6.4	CITY - S	ST-21P				

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 Bluck 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: