FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 744350

(0)

Mar 23 1998 8:00am Secretary of State

FILED

Corporatio	on Name	0 (0)		İ
HDDER	ROOM ASSEMBLY, INC.			
01721	THOOM ASSEMBLT, INC.			1 (BARRI KARKI BIRIL BIRAR BIRIN
Principal Place of Business Mailing Address				r nadini nadis didis didab hirat dalik dalik dalib bidis didis didis didis didis
19701 SW 127TH AVE 19701 SW 127TH AVE				3. Date Incorporated or Qualified
MIAMI FL 33177-1803 MIAMI FL 33177-1803				09/21/1978
US		U\$		4. FEI Number Applied For
				59-1889817 Not Applicable
2. Principal Place of Business 2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional	
21 26				Fee Required
Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22 City & Stel	lo.	City & State		Trust Fund Contribution
23	10	26		7- Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
81 Name				
JOSEPH, JOHN P REV			82 Street	Address (P.O. Box Number is Not Acceptable)
19701 SW 127TH AVE			83	
MIAMI F	L 33177		83	
			84 City	FL 85 Zip Code
11. Purguant to the provisions of Sections 617 0502 and 617 1508. Florida Statutas the above named cornoration 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 617.0503, Florida Statutes.				
SIGNATURE				
	Signature, typed or printed name of registered as		E: Registered Agent signatur	
12.	r [.]	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD PD	DELETE	1.1 TITLE	. L Change L Addition
NAME	KLEPP, REV. BRUCE		1.2 NAME	•
STREET ADDRESS	14952 SW 143 CT		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL TD	M DELETE	1.4 CITY-ST-ZIP 2.1 THLE	Change Addition
NAME	PAINE, EDWARD		2.2 NAME	
STREET ADDRESS	20511 SW 118TH AVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP	
TITLE	SD	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	COWEY, TOM		3.2 NAME	
STREET ADDRESS	10381 SW 156TH ST		3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		3.4. CITY-\$T-ZIP	
TITLE	D	DELETE	4.1 TITLE	☐ Change ☐ Addition
RAME	MENDOLA, RON		4. 2 NAME	
STREET ADDRESS	26543 SW 122ND PLACE		4.3 STREET ADDRESS	
CITY-ST-ZIP	PRINCETON FL	DELETE	4.4 CITY-ST-ZIP	T Change M Addition
TITLE	DT HANGEY ADOLDE	ביין טנוננונ	5.1 TITLE	T ☐ Change ★Addition
NAME CERT ADDRESS	HANLEY, ADOLPH		5.2 NAME	
STREET ADDRESS	19911 SW 114TH ST		5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition
NAME	D Tartak Will		6.2 NAME	Tartak, will
STREET ADDRESS	TArtak, Will 10455, SW 17		6.3 STREET ADDRESS	10455 SW 117+ Street
CITY-ST-ZIP	Mani El		6.4 CITY - ST - 7IP	miami, Fl 33176

It 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Per Bury O Despo

3/11/98

251-0876

CR2E037 (10/9)