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Jan 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 849480 (9)

1. Corporation Name
HIT PROMOTIONAL PRODUCTS, INC.



Principal Place of Business
7150 BRYAN DAIRY RD
LARGO FL 34647
US

Mailing Address
56 CHURCH ST
SPRING VALLEY NY 10977
US

3. Date Incorporated or Qualified 06/19/1981
3a. Date of Last Report 01/30/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-2095421

Applied For

21 Suite Apt. # etc

26 Suite, Apt. #, etc.

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SCHMIDT, ARTHUR W III
STREET ADDRESS 7150 BRYAN DAIRY RD
CITY-ST-ZIP LARGO, FL 00000

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD
NAME TITTLE, DAVID E
STREET ADDRESS 56 CHURCH ST
CITY-ST-ZIP SPRING VALLEY, NY 00000

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE STVP
NAME BECKER, PAUL L
STREET ADDRESS 56 CHURCH ST
CITY-ST-ZIP SPRING VALLEY, NY 00000

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE EVD
NAME SCHMIDT, ARTHUR W JR
STREET ADDRESS 56 CHURCH ST
CITY-ST-ZIP SPRING VALLEY, NY 00000

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE AS
NAME MEADOWS, GARY
STREET ADDRESS 7150 BRYAN DAIRY RD
CITY-ST-ZIP LARGO FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME HANAU, KENNETH J., JR.
STREET ADDRESS 35 HEIGHTS ROAD
CITY-ST-ZIP RIDGEWOOD NJ

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE:

Paul L. Becker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul L. Becker, Vice Pres.

Date

Daytime Phone #

914-356-6000

CR2E034 (9/96)