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

**PROFIT** CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000000916 (6)

H.H.B WARENKONTOR GMBH

Principal Place of Business Mailing Address H.H.B. WARENKONTOR GMBH NESS 1 HAMBURG GERMANY 20457 H.H.B. WARENKONTOR GMBH **NESS 1 HAMBURG GERMANY 20457** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/23/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE Not Applicable 21 26 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country This corporation owes or has paid the current year Intangible Yes ☐ No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HARDWICK, KELLY B III 341 W. DAVIDSON ST. 82 Street Address (P.O. Box Number is Not Acceptable) BARTOW FL 33830 **B3** 84 City 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, Soction 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETĒ Change ☐ Addition TITLE 1.1 TITLE KLAUS-PETER, HERZ NAME 1.2 NAME C/O H.H.B WARENKONTOR GMBH STREET ADDRESS 1.3 STREET ADDRESS NESS 1, 20457 HAMBURG GERMAN CITY-ST-ZIP 1.4 CITY - ST - ZIF ☐ Change Addition DELETE TITLE 2.1 TITLE HOENIG, LEO NAME 2.2 NAME C/O H.H.B WARENKONTOR GMBH STREET ADDRESS 2.3 STREET ADDRESS NESS 1, 20457 HAMBURG GERMAN CITY-ST-ZIP 2. 4 CITY-ST-ZIP 0000024574@daa DELETE TITLE 31 TITLE -03/16/98--01006--002 NAME 3.2 NAME \*\*\*100.00 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP 0000024574**86**611006--003 DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS \*\*\*20.00 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 0000024574BBBange TITLE 5.1 TITLE

14. I 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 carporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in d or on an attachment with an address Block 12 or Block 13 if char

15 49 1

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

5.4 CITY - ST- ZIP

121290

\*\*\*20.00

\*\*\*20.00

-03/16/98--01006--004

-03/16/98--01006--005

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\_\_\_ Addition

**FILED** 

Mar 13 1998 8:00am

Secretary of State