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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

G26816

(0)

H.E.M.P., INC.

FILED Jan 26 1998 8:00am Secretary of State



Frincipal Flace of business		Maining Address	Maning Address				
8415 NW 80 COURT 8415 N		8415 NW 80 COURT					
TAMARAC FL 33321		TAMARAC FL 33321			DO NOT MOITE IN THIS SPACE		
Ì		บร			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					03/08/1983		
Principal Place of Business 2a. Mailing Address					4. FEI Number Appli	ed For	
21 26					59-2270808 Not A	pplicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Add	ditional	
22 27		27	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	ired	
City & State	e	City & State	State		6. Election Campaign Financing \$5.00 M	av Ro	
23		28			Trust Fund Contribution		
	Zip Country Zip		Country		8. This corporation owes or has paid the current year Intan		
24	25 29 30		_ ´		Personal Property Tax due June 30. X Yes \(\square\)		
24	9. Name and Address of Curre		101		10. Name and Address of New Registered Agent		
13/7	***************************************	Sitt Hogistoros Agont	81	Name	10. 11. 11. 11. 11. 11. 11. 11. 11. 11.		
WEINFELD, PHILIP			"	Name			
841		82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
TAMARAC FL 33321							
			83				
			24	0'4	loc l 7% Co		
			84	City	EI 85 Zip Co	αe	
44 Digregant	to the provisions of Sections 607.05	02 and 607 1508 Florida Statutes	the above	named corn		enistered	
office or r	egistered agent, or both, in the Stat	te of Florida. Such change was au	thorized by	the corporati	oration submits this statement for the purpose of changing its r ion's board of directors. I hereby accept the appointment as re	gistered	
agent, I a	m familiar with, and accept the obli	gations of, Section 607.0505, Flor	ida Statutes	•			
SIGNATURE							
	Signature, typed or printed name of registered a			nt signature require	ed when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	PD	☐ DELÉTÉ	1,1 TITLE		Change i	Addition	
NAME	WEINFELD, PHILIP	1,2		ł			
STREET ADDRESS	8415 NW 80 COURT	1,3		ADDRESS			
CITY-ST-ZIP	TAMARAC FL			- ZIP	•		
TITLE	TD	☐ DELETE			Change [Addition	
NAME	WEINFELD, HARRIET		2.2 NAME	1			
1 1	8415 NW 80 COURT		2.3 STREET				
STREET ADDRESS							
CITY-ST-ZIP	TAMARAC FL			T-ŹIP	Change	Addition	
TITLE			3,1 TITLE		Change	Addition	
NAME	· · · · · · · · · · · · · · · · · · ·		3.2 NAME				
STREET ADDRESS	8415 NW 80 COURT		3.3 STREET	ADDRESS			
CITY-ST-ZIP	TAMARAC FL		3.4. CITY - S	T-ZIP			
TITLE	V DELETE		4.1 TITLE		☐ Change	Addition	
NAME	PERRY, ELAINE		4. 2 NAME				
STREET ADDRESS	8415 NW 80 COURT		4,3 STREET	ADORESS			
; ;	TAMARAC FL		•	ì			
CITY-ST-ZIP	IAWARAO FE	DELETE	4.4 CITY - ST	-4P	☐ Change	Addition	
TITLE		☐ DETEIE	5.1 TITLE		Change	WAGIIIOH	
NAME			5.2 NAME				
STREET ADORESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP		5.4.0		-ZIP			
TITLE			6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS							
NERFE ADDRESS I			E 2 CYDCEY	Annocce			
			6.3 STREET				
CITY-ST-ZIP		udah akta dilan dan dan dan dan dan dan dan dan dan d	6.4 CITY - ST	- ZIP	Section 119.07(3)(i), Florida Statutes. I further certify that the in	armailán	

4.1 I bereby certify that the information supplied with this filling does not quality 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 if changed or or an attachment with an address.

SIGNATURE-

assies Tylerafeldned TD

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