

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Gloria B. Mortimer
Secretary of State
FIDELITY OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G73769 (3)

1. Corporation Name
HYER, INC.

Principal Place of Business: **5007 S. DIXIE HIGHWAY
P.O. BOX 6536
WEST PALM BEACH FL 33405-7536**

Mailing Address: **5007 S. DIXIE HIGHWAY
P.O. BOX 6536
WEST PALM BEACH FL 33405-7536**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/08/1983	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2353184	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for nonpayment of taxes under Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Zip 29

9. Name and Address of Current Registered Agent

**FRANKLIN, ELLIOTT A.
1030 LAKE AVE SUITE C
LAKE WORTH FL 33460**

10. Name and Address of New Registered Agent

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 607.05(2) and 607.15(4), 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 607.05(5), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PD RANGWALLA, HASSAN YAHYA 2443 10TH AVE N LAKE WORTH FL	TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	STD RANGWALLA, CARMEN 2443 10TH AVE N LAKE WORTH FL	TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY, ST, ZIP		TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is substantially true and correct and that the information stated in Section 11 of this report is true and correct 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 liquidator empowered to receive this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed in an attachment with an address.

SIGNATURE: */s/ H Rangwalla* **4/1/95**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR