

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H29023 (9)

1. Corporation Name

HRK INVESTMENTS AND BUSINESS CONSULTANTS OF HALL
ANDALE, INC.



Principal Place of Business

128 NE FIRST AVENUE
P O BOX 1204
HALLANDALE FL 33009

Mailing Address

128 NE FIRST AVENUE
P O BOX 1204
HALLANDALE FL 33009

3. Date Incorporated or Qualified
11/02/1984

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 24 NE FIRST AVE

26 P.O. BOX 1204

4. FEI Number

59-2480908

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 intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

HALLANDALE - FL

28 City & State

HALLANDALE - FL

24 Zip

33009

25 Country

USA

29 Zip

33008

30 Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOZLOWSKI, HARRY
19390 COLLINS AVENUE, #1208
NORTH MIAMI 33180

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

Harry Kozlowski

Signature, typed or printed name of registered agent and, if not applicable, date

(PRINT) Registered Agent Signature required when not filing

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KOZLOWSKI, HARRY R.
STREET ADDRESS 128 N.E. FIRST AVE.
CITY-ST-ZIP HALLANDALE FL ☐ DELETE

TITLE VD
NAME KOZLOWSKI, RAQUEL
STREET ADDRESS 128 N.E. FIRST AVE.
CITY-ST-ZIP HALLANDALE FL ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE:

Harry Kozlowski Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/96 254-9442288

CR2E034 (12/95)