

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

FILED

Mar 10 1998 8:00am
Secretary of State

| | | |
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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | 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.**

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|--|---|
| Principal Place of Business 24 NE FIRST AVE. P O BOX 1204 HALLANDALE FL 33009 US | Mailing Address P.O. BOX 1204 P O BOX 1204 HALLANDALE FL 33009 US |
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DO NOT WRITE IN THIS SPACE

| | | | | | |
|---|--|--|--|---|--|
| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country | | 3. Date Incorporated or Qualified 11/02/1984 | |
| 4. FEI Number 59-2480908 | | Applied For <input checked="" type="checkbox"/> Not Applicable | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | 8. \$5.00 May Be Added to Fees | |

| | | | |
|--|--|---|--|
| 9. Name and Address of Current Registered Agent KOZLOWSKI, HARRY 18390 COLLINS AVENUE, #1208 NORTH MIAMI 33160 | | 10. Name and Address of New Registered Agent 81 Name KOZLOWSKI, HARRY 82 Street Address (P.O. Box Number is Not Acceptable) 3810 WASHINGTON ST #1208 83 City HOLLYWOOD FL 85 Zip 33021 | |
|--|--|---|--|

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 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 KOZLOWSKI, HARRY R. <input checked="" type="checkbox"/> DELETE | 1.1 TITLE | KOZLOWSKI, HARRY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 128 N.E. FIRST AVE. | 1.2 NAME | 3810 WASHINGTON ST #1208 |
| STREET ADDRESS | HALLANDALE FL | 1.3 STREET ADDRESS | HOLLYWOOD - FL - 33021 |
| CITY-ST-ZIP | | 1.4 CITY-ST-ZIP | |
| TITLE | VD KOZLOWSKI, RAQUEL <input checked="" type="checkbox"/> DELETE | 2.1 TITLE | KOZLOWSKI, RAQUEL S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 128 N.E. FIRST AVE. | 2.2 NAME | 3810 WASHINGTON ST #1208 |
| STREET ADDRESS | HALLANDALE FL | 2.3 STREET ADDRESS | HOLLYWOOD - FL - 33021 |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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 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

1/20/98

CR2E034 (10/97)