## 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 #

1. Corporation Name H69863 (9)

**FILED** Mar 10 1998 8:00am Secretary of State

H & G	STUDIOS, INC.									
Principal Place	e of Business	Mailing Addre	ess						J.1. 8.811	#1811 1881
5660 CORPORATE WAY 5660 CORPORATE WAY										
WEST PALM BEACH FL 33407 WEST PALM BEACH FL 3				33407			DO NOT WRITE IN T	HIS SPACE		
U\$ U\$							3. Date Incorporated or Qualified			
							08/06/1985			
2. Principal Pl	ace of Business	2a. Mailing Ad	ddress			· · · · · · · · · · · · · · · · · · ·	4, FEI Number		Apr	olied For
21		26					65-0010032 Not Applicable			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional			
22		27					6. Certificate of Status Desired	F	ee Req	uired
City & State	•	City & State					6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution		ded to	
Zip	├──			Cou	ntry		8. This corporation owes or has paid the			
24	[25]	29		30			Personal Property Tax due June 30.  10. Name and Address of New Registe	Yes		No
	g. Name and Address of Currer	it Registered Ager	nı		81	Name	10. Name and Address of New Registe	ied Agent		
GABBE, RICHARD E.					ا"	IVATIO				
5660 CORPORATE WAY					82	Street Address (P.O. Box Number is Not Acceptable)				
WEST PALM BEACH FL 33407				}	83					
					83					
				ľ	84	City		FL  85	Zip C	ode
	70,000,000	0 - 1007 1500 50					paration submits this statement for the surpo	CL	nina ite	registered
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			0.07	, a			ed when reinstating) DA	TE.		
	Signature, typed or printed name of registered ag	ID DIRECTORS	(NUI	13.	Age	ent signatura require	ADDITIONS/CHANGES TO OFFICERS		CTORS	3 IN 12
12.	DPT OF TOERS AN		DELETE	1.1 10	TLE.		TABBITION OF THE TABLE TO STATE OF THE COLOR	☐ Ch		Addition
NAME	GABBE, RICHARD E.	_		1.2 NA						
STREET ADDRESS	11 EDINBURGH DRIVE			1.3 ST	REET	ADDRESS				_
CITY-ST-ZIP	PALM BEACH GARDENS FL			1.4 CF						_
TITLE	D		DELETE	2.1 TI				☐ Ch	ange	Addition
NAME	GABBE, BENITA L.			2.2 NA	ME					
STREET ADDRESS	11 EDINBURGH DRIVE			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDENS FL			2. 4 C						
TITLE			DELETE	3.1 10	_			Ch	ange	Addition
NAME				3.2 NA	ME					
STREET ADDRESS				3.3 ST	REET	ADDRESS				
CITY-ST-ZIP				3.4. C	iTY-S	ST-ZIP				
TITLE			DELETE	4.1 TI				Ch	ange	☐ Addition
NAME				4.2 N	AME					
STREET ADDRESS				4.3 ST	REET	ADDRESS				
CITY-ST-ZIP				4.4 C(		ŀ				İ
TITLE			DELETE	5.1 10				☐ Ch	ange	Addition
NAME				5.2 NA	ME					
STREET ADDRESS				5.3 ST	REET	ADDRESS				
CITY-ST-ZIP				5.4 CI						
TITLE			DELETE	6.1 TF				☐ Ch	ange	Addition
NAME				6.2 NA	AME	i				
STREET ADDRESS				1		ADDRESS				
CITY-ST-ZIP				6.4 CI						
14 I barabu s	certify that the information supplied v	vith this filing does	not qualify fo	or the eye	mn	tion stated in	Section 119.07(3)(i), Florida Statutes. I furth	er certify th	at the i	information
							re shall have the same legal effect as if mac uired by Chapter 607, Florida Statutes; and	that my nan	ne app	