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

**PROFIT** CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

12645 S.W. 114TH AVE.

MIAMI FL 33176

21

22

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H90420

Country

9. Name and Address of Current Registered Agent

25

JARVIS, JAMES W.

(1)

JACK D. HAHN SALES, INC.

Mailing Address 12645 S.W. 114TH AVE. MIAMI FL 33176

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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## **FILED** Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

3. Date Incorporated or Qualified 12/12/1985

59-2613053

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

4. FEI Number

SUITE 104			82	82 Street Address (P.O. Box Number is Not Acceptable)							
			83	<del> </del>							
1410	TWILE 03143			Ļ							
			84	C	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											
	Signature, typed or printed name of registered agent and title if applicab	ile. (NOTE. Re		ent siç	ignature requir	ed when reinstating)		DATE			
12.	OFFICERS AND DIRECTORS		13.			ADDITION	S/CHANGES TO	OFFICERS AND			
TITLE	DP	DELETE	1.1 TITLE		ĺ				☐ Change	Addition	
NAME	HAHN, JACK D.		1.2 NAME								
STREET ADDRESS	12645 SW 114 AVE.		1.3 STREET	( ADD	RESS						
CITY - ST - ZIP	MIAMI FL		1.4 CITY-S	3T-ZIF	P						
TITLE	D	DELETE	2.1 TITLE						Change	☐ Addition	
NAME	HAHN, MARJORIE J.		2.2 NAME								
STREET ADDRESS	12645 SW 114 AVE.		2.3 STREET	r addr	DRESS						
CITY-ST-ZIP	MIAMI FL		2. 4 CITY - S	ST-ZI	mp .						
TITLE		DELETE	3.1 TITLE						Change	Addition	
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET	ADDF	RESS					ľ	
CITY-ST-ZIP			3.4. CITY-S	ST-ZH	i5						
TITLE		DELETE	4.1 TITLE						Change	Addition	
NAME			4. 2 NAME							]	
STREET ADDRESS			4.3 STREET	ADDE	RESS					i	
CITY-ST-ZIP		1	4.4 CiTY-\$	ST-ZiP	P						
TITLE		☐ DELETE	5.1 TITLE						Change	Addition	
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET	ADDF	RESS						
CITY-ST-ZIP			5.4 CITY-S	sT-Zi₽	Р						
TITLE		☐ DELETE	6.1 TITLE				<u></u>	,	Change	Addition	
NAME			6.2 NAME								
STREET ADDRESS		i	6.3 STREET	ADDR	RESS					į	
CITY-ST-ZIP			6.4 CITY - ST								
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.											

Country

81 Name

30

Applied For

\$8.75 Additional

Fee Required

**\$5.00** May Be

Added to Fees

☐ Yes

Not Applicable