02131999-90016-027-\$150.00-\$150.00

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CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J17360

HIALEAH SERVICES, INC.

Principal Place of Business Mailing Address					· theiring medi (16)7 times title mitt) at			
105 E. 21ST STREET 105 E. 21ST STREET								
HALEAH FL 32010 HIALEAH FL 33010					DO NOT WRITE IN THIS SPACE			
(US US					3. Date Incorporated or Qualified			1
ļ					06/02/1986			
		2a. Mailing Address			4 FEI Number		plied For	┨
├					59-2814032	<u> </u>	t Applicable	"
25 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75		١.
					5. Certificate of Status Desired	Fee Re		ŀ
22 City & Stall	City & State	State		s. Election Compaign Financing			1	
				شە يىندىسلىكتى، -	Trust Fund Contribution	Added		
		Zip	Country		8. This corporation owes the current y			1
24				Personal Property Tax. Yes No				İ
g Name and Address of Current Registered Agent			'		10. Name and Address of New Registered Agent			
	9. Hand and Made and a continue		81	Name	 			1
VAN LINDT, JOHN					(2.0.0			1
105 E. 21ST STREET			82	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
HIALEAH FL 33010			83			10.3.50 (4.7.3)	(1 -)	
					3		(<u> </u>	1
, ,			84	City	, , , , , , , , , , , , , , , , , , , ,	FL 85 Zip (Code	ĺ
44 Duminant	to the amideione of Sections 607 0502	and 607 1508 Florida Statutes	the abov	t. e-named corpo	ration submits this statement for the our	ose of changing its	registered	ĺ
office of r	registered agent, or both, in the State of	f Florida. Such change was auth	orized by	the corporation	vation submits this statement for the purp n's board of directors. I hereby accept the	appointment as re	gistered	l
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florida	a Statutes	.				l
SIGNATURE	Signature, typed or printed rarge of registered agent	and this V applicable /NOVE: Co.	cistared Aces	ni eignature required r	when minstation)	ATE		-
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12) &
TITLE	P	☐ DELETE	1,1 TITLE			☐ Change	☐ Addition	R2F034 (11/98)
NAME	BRUNETTI, JOHN J.		1.2 NAME					3
STREET ADDRESS	105 E. 21ST STREET		13 STREE	TADORESS			,	Ö
CITY-ST-ZIP	HIALEAH FL		1.4 CTY-S					ន្ត
TITLE	V	☐ DELETE	2.1 TITLE	" =		☐ Change	Addition	ਹ
NAME	BRUNETTI, JOHN J., JR.		2.2 NAME	.				1
STREET ADDRESS	105 E. 21ST STREET			T ADDRESS				Į
	HIALEAH FL		2.4 CITY-5					1
CITY-ST-ZIP	S	☐ DELETE	31 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition	ĺ
NAME	BRUNETTI, STEPHEN P		3.2 HAME			- •		
-	AND PAINT OFFI		3.3 STREET	ranneess				[
STREET AUUKESS	HIALEAH FL		34. CITY-5		:			1
CITY-ST-ZIP	T	☐ DELETE	4.1 TITLE	1-615		Change	☐ Addition	
NAME	BOBER, MONROE		4.2 NAME		•	_ *	_	ĺ
	105 E 21ST STREET		_	TADORESS				ĺ
STREET ADORESS	HIALEAH FL		4.3 STREE 4.4 CITY-S				•	ĺ
TITLE	TRACEPOT FL	□ OELETE	5.1 TITLE	1745		☐ Change	Addition	1
I HILE			AL HITE	ľ		٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		4

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

STEVEN PBRUNEHI

DELETE

FILED Feb 13, 1999 8:00 am Secretary of State

02-13-1999 90016 027 ***150.00

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Change

☐ Addition