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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # K21706

(2)

HARBRO CORP.

Principal Place of Business

Mailing Address

FILED Jan 22 1998 8:00am Secretary of State



1055 BUCHAI HOLLYWOOD		10518 WEYMOUTH ST. APT. 201								
US	12 00010	BETHESDA MD 20814				DO NOT WRITE IN THIS SPACE				
		-				3. Date Incorporated or Qualified			,	
						04/25/1988				
Principal Place of Business 2a. Mailing Address						4. FEI Number	$\neg \neg$	Ap	plied For	
21		26	6			65-0055171 Not Ap			t Applicable	
Suite, Apl. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired			dditional	
22	<u> </u>	27					F	ee Re	quired	
City & State	e	City & State				6. Election Campaign Financing			Мау Ве	
23		28				Trust Fund Contribution			o Fees	
Zip	Country	Zip	Count	ry		8. This corporation owes or has paid the cu				
24	25		30				Z Yes		No	
	9. Name and Address of Currer	it Registered Agent				10. Name and Address of New Registered	Agent		· 	
KA	PLAN, ESQ., DOUGLAS		8	1 1	Name					
253	35 HOLLYWOOD BLVD.		82 Street Add			ess (P.O. Box Number is Not Acceptable)				
НО	LLYWOOD FL 33020		83	3					 	
			84	l.	City		7051	Zin C	No do	
			6,	•	City	FL	85	Zip C	20de	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the abov	ve-r	named corpo	oration submits this statement for the purpose of	fchan	ging its	registered	
office or re	egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Such change was au ations of, Section 607,0505, Flori	thorized to da Statute	by tr es.	ne corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	ointme	ent as r	registered	
SIGNATURE	Signature, typed or printed name of registered age	int and little if applicable. (NOTE: I	Registered A	gent s	signature require	nd when reinstating) DATE				
12,	ÖFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTORS	S IN 12	
TITLE	PD	DELETE	1.1 TITLE				Ch	апде	Addition	
NAME	Brooks, Marvin S		1.2 NAME							
STREET ADDRESS	10518 WEYMOUTH ST.		1.3 STREE		DORESS					
CITY-ST-ZIP	BETHESDA MD		1,4 CITY-		- 1					
TITLE	STD	DELETE	2.1 TITLE		<u>Cir</u>		T Ct	ange	Addition	
NAME	BROOKS, MARVIN S		2.2 NAME						_	
1	10518 WEYMOUTH ST		2.3 STREET ADDRESS							
STREET ADDRESS										
CITY-ST-ZIP	BETHESDA MD		2. 4 CITY-ST-ZIP		ZIP		7 T CL	nange	Addition	
TITLE	Li DELEIE		3.1 TITLE		}		Ш и	auge	Addition	
NAME			3.2 NAME		1					
STREET ADDRESS			3.3 STREE	et ad	IDRESS					
CUTH-ST-ZIP			3.4. CITY		ZIP					
TITLE '	☐ DELETE		4.1 TITLE		}		L_ Ch	ange	Addition	
NAME			4. 2 NAME	E						
STREET ADDRESS			4.3 STREE	ET AD	ORESS					
CITY - ST - ZIP			4,4 CITY-	-ST- 2	ZIP					
TITLE		■ DELETE	5.1 TITLE			 -	☐ Ch	ange	☐ Addition	
NAME			5.2 NAME	.						
STREET ADDRESS			5.3 STREE	ET ADI	DRESS					
CITY-ST-ZIP			5.4 CITY -	ST-2	ŽIP					
TITLE		☐ DELETE	6.1 TITLE				Ch	ange	☐ Addition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREE		IDRESS					
			6,4 CITY-							
CITY-ST-ZIP	ertify that the information supplied w	ith this filing does not qualify for				Section 119.07(3)(i), Florida Statutes. I further ce	rtify th	at the i	information	
indicated	on this annual report or supplements	i annual report is true and accur	ate and th	hat r	my signature	e shall have the same legal effect as if made un	der oa	th; that	t 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.