

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22 1996 8:00 am
Secretary of State

DOCUMENT # K70536 (3)

1. Corporation Name
MHI, INC.



Principal Place of Business

2001 SW 20TH ST
~~6226 NW 24TH ST~~
FT LADUERDALE FL 33315
US

Mailing Address

2001 SW 20TH ST
~~6226 NW 24TH ST~~
FT LADUERDALE FL 33315
US

2. Principal Place of Business	2a. Mailing Address
21 2001 S.W. 20TH St.	26 2001 S.W. 20TH St.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Ft. Lauderdale Fla.	28 City & State Ft. Lauderdale, Fla.
24 Zip 33315	29 Zip 33315
25 Country USA	30 Country USA

3. Date Incorporated or Qualified 03/06/1989	3a. Date of Last Report 06/20/1995
4. FEI Number 65-0176706	Applied For Not Applicable
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

HUFF, RICHARD E
2001 SW 20TH ST
FT LADUERDALE FL 33315

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 applicable)

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PST	DELETE
NAME	HUFF, RICHARD E.	
STREET ADDRESS	6226 NW 24TH ST	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	D	☐ DELETE
NAME	BROWN, PETER	
STREET ADDRESS	4776 GROSVEN	
CITY-ST-ZIP	MONTREAL QU	
TITLE	D	☐ DELETE
NAME	SMITH, CAHRLES W	
STREET ADDRESS	402 DELMAR	
CITY-ST-ZIP	CORPUS CHRISTI TX	
TITLE	PSTD	☐ DELETE
NAME	HUFF, RICHARD E	
STREET ADDRESS	2001 SW 20TH ST	
CITY-ST-ZIP	FT LADUERDALE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSTD	☒ Change ☐ Addition
1.2 NAME	RICHARD E. HUFF	
1.3 STREET ADDRESS	2001 SW 20TH ST	
1.4 CITY-ST-ZIP	Ft LADUERDALE FLA 33315	☐ Change ☐ Addition
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		☐ Change ☐ Addition
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		☐ Change ☐ Addition
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		☐ Change ☒ Addition
5.1 TITLE	D	
5.2 NAME	EDWARD E. HUFF	
5.3 STREET ADDRESS	3504 F COLONY RD.	
5.4 CITY-ST-ZIP	CHARLOTTE N.C. 28211	☐ Change ☐ Addition
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: RICHARD E. HUFF - Pres. 2/26/96 954-522-3655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

CHARTER & FILING #

CR2E034 (12/95)