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May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # L11419 (3)

1. Corporation Name
HIREL MARKETING, INC.

Principal Place of Business	Mailing Address
~~19500 NE 10TH AVENUE~~ ~~SUITE A~~ ~~NORTH MIAMI BEACH FL 33179~~ ~~US~~	~~19500 NE 10TH AVENUE~~ ~~SUITE A~~ ~~NORTH MIAMI BEACH FL 33179 3579~~ ~~US~~

2. Principal Place of Business: 21 650 S.W. 16th Terrace	2a. Mailing Address: 26 650 S.W. 16th Terrace
Suite, Apt #, etc. 22	Suite, Apt #, etc. 27
City & State 23 Pompano Beach, FL	City & State 28 Pompano Beach, FL
Zip 24 33069 Country 25 USA	Zip 29 33069 Country 30 USA

3. Date Incorporated or Qualified: 06/25/1989
3a. Date of Last Report: 04/05/1996
4. FEI Number: 65-0150181 ☐ 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
~~JOHN F LATORRE~~
~~19500 NE 10TH AVENUE~~
~~SUITE A~~
~~NORTH MIAMI BEACH FL 33179~~

10. Name and Address of New Registered Agent
81 Name: William H. Aden
82 Street Address (P.O. Box Number is Not Acceptable): 650 S.W. 16th Terrace
83
84 City: Pompano Beach FL 85 Zip Code 33069

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] 4-29-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~ST~~ ☐ DELETE	1.1 TITLE	V ☒ Change ☐ Addition
NAME	FAGNANI, VINCENT JR.	1.2 NAME	
STREET ADDRESS	~~19500 NE 10TH AVENUE SUITE A~~	1.3 STREET ADDRESS	650 S.W. 16th Terrace
CITY-ST-ZIP	~~NORTH MIAMI BEACH FL~~	1.4 CITY-ST-ZIP	Pompano Beach, FL 33069
TITLE	~~PSEO~~ ☐ DELETE	2.1 TITLE	C ☒ Change ☐ Addition
NAME	MONTELIONE, VINCENT	2.2 NAME	
STREET ADDRESS	~~19500 NE 10TH AVENUE SUITE A~~	2.3 STREET ADDRESS	650 S.W. 16th Terrace
CITY-ST-ZIP	~~NORTH MIAMI BEACH F~~	2.4 CITY-ST-ZIP	Pompano Beach, FL 33069
TITLE	☐ DELETE	3.1 TITLE	P ☐ Change ☒ Addition
NAME		3.2 NAME	Michael S. Duggan
STREET ADDRESS		3.3 STREET ADDRESS	650 S.W. 16th Terrace
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Pompano Beach, FL 33069
TITLE	☐ DELETE	4.1 TITLE	VS ☐ Change ☒ Addition
NAME		4.2 NAME	William H. Aden
STREET ADDRESS		4.3 STREET ADDRESS	650 S.W. 16th Terrace
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Pompano Beach, FL 33069
TITLE	☐ DELETE	5.1 TITLE	V ☐ Change ☒ Addition
NAME		5.2 NAME	Dennis E. Nelson
STREET ADDRESS		5.3 STREET ADDRESS	650 S.W. 16th Terrace
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Pompano Beach, FL 33069
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing 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.

SIGNATURE: William H. Aden 4-29-97 954-942-5390
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0242491