

FILED

Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

Jan 17 1997 8:00am
Secretary of State

DOCUMENT # L17763

(8)

1. Corporation Name

HANDICAPPED SALES WORKSHOP, INC.

Principal Place of Business

Mailing Address

4850 N. STATE 7
SUITE C
LAUDERDALE LAKES FL 33319
US

4850 N. STATE ROAD
SUITE C
TAMARAC FL 33319
US

3. Date Incorporated or Qualified
09/19/1989

3a. Date of Last Report
02/26/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0145557

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LENIHAN, ELYSE
4850 N. ST. RD. 7, SUITE C
LAUDERDALE LAKES FL 33319

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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 applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D
LENIHAN, ELYSE
8966 NW 21ST COURT
CORAL SPRINGS FL

1.1 TITLE ☐ Change ☐ Addition

NAME

1.2 NAME

STREET ADDRESS

1.3 STREET ADDRESS

CITY - ST - ZIP

1.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME

2.1 TITLE

STREET ADDRESS

2.2 NAME

CITY - ST - ZIP

2.3 STREET ADDRESS

TITLE ☐ DELETE

NAME

3.1 TITLE

STREET ADDRESS

3.2 NAME

CITY - ST - ZIP

3.3 STREET ADDRESS

TITLE ☐ DELETE

NAME

4.1 TITLE

STREET ADDRESS

4.2 NAME

CITY - ST - ZIP

4.3 STREET ADDRESS

TITLE ☐ DELETE

NAME

5.1 TITLE

STREET ADDRESS

5.2 NAME

CITY - ST - ZIP

5.3 STREET ADDRESS

TITLE ☐ DELETE

NAME