

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L51602** (5)

1. Corporation Name

H.U.G., INC.

Principal Place of Business

Mailing Address

**800 WEST AVE
HARVEY GOODMAN
MIAMI BEACH FL 33139**

**800 WEST AVE
HARVEY GOODMAN
MIAMI BEACH FL 33139**



2. Principal Place of Business:	2a. Mailing Address
21 15105 NW 77th AVENUE	26 15105 NW 77th AVENUE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 4th FLOOR	27 4th FLOOR
City & State	City & State
23 MIAMI LAKES, FL	28 MIAMI LAKES, FL
Zip	Zip
24 33014	29 33014
Country	Country
25 USA	30 USA

3. Date Incorporated or Qualified 02/13/1990	3a. Date of Last Report 06/14/1995
4. FEI Number 59-1346983	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

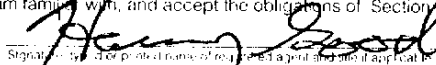
10. Name and Address of New Registered Agent

**GOODMAN, HARVEY
800 WEST AVENUE
MIAMI BEACH FL 33139**

81 Name	GOODMAN, HARVEY
82 Street Address (P.O. Box Number is Not Acceptable)	15105 NW 77th AVENUE
83	
84 City	MIAMI LAKES
85 Zip Code	FL 33014

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



HARVEY GOODMAN, PRESIDENT 06/14/96

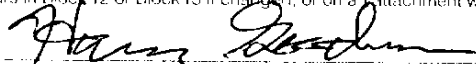
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	PRESIDENT/DIRECTOR
NAME	GOODMAN, HARVEY	12 NAME	GOODMAN, HARVEY
STREET ADDRESS	800 WEST AVE	13 STREET ADDRESS	15105 NW 77th AVENUE
CITY-ST-ZIP	MIAMI BEACH FL	14 CITY-ST-ZIP	MIAMI LAKES, FL 33014
TITLE		21 TITLE	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



HARVEY GOODMAN 06/14/96 (305) 827-8600

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

OR TYPE OR PRINTED NAME

CR2E034 (3/96)