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STREET ADDRESS

SIGNATURE:

Block 12 or Block 13 if changed, or on an attachment with an address

CITY-ST-7IP

Apr 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortkam. ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 **DOCUMENT** # 1. Corporation Name (1)HECHT ENTERPRISES OF GAINESVILLE, INC. Mailing Address Principal Place of Business % THOMAS G. CHRISTMANN 3008 NE 19TH DR GAINESVILLE FL 32609 % THOMAS G. CHRISTMANN 3008 NE 19TH DR GAINESVILLE FL 32609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1990 2. Principal Place of Business 2a. Mailing Address Applied For 59-2993343 Not Applicable 21 26 Suite, Apt #, etc Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 26 Trust Fund Contribution Added to Fees Zıp Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CHRISTMANN, THOMAS G. 527 E UNIVERSITY AVE 82 **GAINESVILLE FL 32601** University Ave 83 City Gaines ville Zip Code 3260 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 above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with accept the appointment as registered agent. I am familiar with accept the appointment as registered agent. I am familiar with accept the appointment as registered agent. I am familiar with accept the appointment as registered agent. I am familiar with accept the appointment as registered agent. I am familiar with accept the appointment as registered agent. I am familiar with a company the accept the appointment as registered agent. I am familiar with a company the accept the appointment accept the appointment as registered agent. I am familiar with a company the accept the appointment accept the appointment accept the 4-21-98 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTO 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE Change TITLE 1.1 TITLE HECHT, WILLIAM P NAME 1.2 NAME 3008 NE 19TH DR STREET ADDRESS 1.3 STREET ADDRESS GAINESVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE HECHT, CARMEN J NAME 2.2 NAME 3008 NE 19TH DR STREET ADDRESS 2.3 STREET ADDRESS **GAINESVILLE FL** CITY-S1-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 City-ST-ZIP

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14. I 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

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