

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY 23 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L86931 (7)

1. Corporation Name

H & H BROADLOOM, INC.

2. Principal Place of Business

**2206 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020**

3. Mailing Address

**2206 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/13/1990

3a. Date of Last Report

04/20/1994

2. This is a change of (Supplement)

21

2a. Mailing Address

26

4. FEI Number

65-0208476

Applied For

Not Applicable

State Apt # etc

22

State Apt # etc

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

County

24

County

25

City

29

Validity

30

8. This corporation has liability for intangible tax under 19-199 (D.S.
Florida Statutes) ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**MANELLA, ROSS
2206 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. I, the undersigned, in the presence of two or more disinterested persons, hereby certify that the above named corporation submits this statement for the purpose of changing its registered office to the address indicated in this report, and that such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am not a director, officer, or shareholder of the corporation.

SIGNATURE

Signature of Registered Agent (Type or Print Name of Agent)

Signature of Officer or Director (Type or Print Name of Officer or Director)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

14

**PD
GOLDBERG, HARVEY
3300 NE 192 ST.
N. MIAMI BCH FL**

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SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harvey Goldberg

05/09/95

Date

Signature of Agent

0000773 CP

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1995



FLORIDA DEPARTMENT OF STATE
Darius B. McPherson
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # **L88193**

(2)

PABLO CENTER BUILDING, INC.

RECEIVED
MAY 10 1995
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
415 PABLO AVE N JACKSONVILLE BEACH FL 32250	415 PABLO AVE N JACKSONVILLE BEACH FL 32250

2. Principal Place of Business	2a. Mailing Address
21. State: April 1995	26. State: April 1995
22. City & State	27. City & State
23. Zip	28. Zip
24. City	29. City
25. State	30. State

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification	3a. Date of Last Report
07/18/1990	02/28/1994
4. FID Number	Applied For
59-3019665	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. Does corporation have liability for damages for undercapitalization?	Yes ☐ No ☐

9. Name and Address of Current Registered Agent

GLICKSTEIN, JOSEPH M., JR.
444 3 ST
NEPTUNE BEACH FL 32233

10. Name and Address of New Registered Agent

81. Name	82. Street Address (or P.O. Box Number, if Not Applicable)	83. City	84. State	85. Zip Code
			FL	

11. Pursuant to the provisions of law being filed hereunder, the above-captioned corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the state of Florida. I, the undersigned, being duly authorized by the corporation's board of directors, hereby accept the appointment as registered agent, and accept the responsibility of the corporation for the filing of this statement.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	ADDRESS	NAME	ADDRESS
D EKSTROM, BRUCE K. 415 PABLO AVE N JACKSONVILLE BCH FL			
PD MESSERLIE, CAROL 415 PABLO AVE N JACKSONVILLE BCH FL			
D LUCIER, ROBERT P. 415 PABLO AVE N JACKSONVILLE BCH FL			
D KOLODZIEJ, DEBORAH 415 PABLO AVE N JACKSONVILLE BCH FL			
VSD BONKOSKI, MARVIN E. 415 PABLO AVE N JACKSONVILLE BCH FL			

Director of Finance
Shea Vincent J.
415 Pablo Ave
Jacksonville Beh, FL 32250

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law being filed hereunder. I further certify that the information included on this annual report or supplementary statement is true and correct to the best of my knowledge and belief, and that my signature shall have the same legal effect as if made in person. I am an officer or director of the corporation or the person or persons authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 13, changed, or both, in the annual report or statement.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/95 9002411200

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**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # L88351 (6)

01 MAY 1996 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNTING PRODUCTIONS OF CENTRAL FLORIDA, INC.

1. Principal Place of Business 1700 UNIVERSITY DR STE 200 CORAL SPRINGS FL 33071 US		2a. Mailing Address 1700 UNIVERSITY DR STE 200 CORAL SPRINGS FL 33071 US		3. Date of Incorporation or Creation 07/10/1990		3a. Date of Last Report 05/01/1994	
2. Principal Place of Business 21 SUITE # 300		2a. Mailing Address 26 SUITE 300		4. FEI Number 59-3021150		Approved For Not Applicable	
22. City & State 23		27. City & State 28		5. Certificate of Status Issued ☐		\$8.75 Additional Fee Required	
24. City & State 25		29. City & State 30		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. City & State 25		29. City & State 30		7. Does corporation have a secretary? ☒ Yes ☐ No		Florida Statutes	

9. Name and Address of Current Registered Agent

**SIEGELAUB, STEVEN
4922 NW 81ST AVE
CORAL SPRINGS FL 33067**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.002 and 607.003, Florida Statutes, the above named corporation voluntarily has changed its registered office of corporate records in the State of Florida. Such change was authorized by the corporation's board of directors, third party or the appointment of registered agent. I am hereby certifying the change of office of the corporation.

Signature

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P ROBINSON, IRA T.	NAME	
ADDRESS	1451 NW 113 AVE	ADDRESS	
CITY	PEMBROKE PINES FL	CITY	
NAME	V SIEGELAUB, STEVEN	NAME	
ADDRESS	4922 NW 81ST AVENUE	ADDRESS	
CITY	CORAL SPRINGS FL	CITY	
NAME		NAME	
ADDRESS		ADDRESS	
CITY		CITY	
NAME		NAME	
ADDRESS		ADDRESS	
CITY		CITY	
NAME		NAME	
ADDRESS		ADDRESS	
CITY		CITY	
NAME		NAME	
ADDRESS		ADDRESS	
CITY		CITY	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stipulated in Section 607.002(1)(b), Florida Statutes. I further certify that the information included in this annual report or supplementary annual report is true and accurate and that my signature shall cause the same to be filed as if made under oath. That I am an officer or director of the corporation or the manager or trustee engaged to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears in Block A of the new Florida Corporate Records Office with its address.

SIGNATURE:

Steven Siegelau
STEVEN SIEGELAUB
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/18/95

305 753-2222