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PROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:



. FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Mar 05 1997 8:00am

Secretary of State

561-734-9095

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M08661

(4)

HEN-JO INC.

	Principal Place of Business		Mailing Address						
4390 HUPOLUXO ROAD BOX 134 LANTANA FL 33462		4390 HUPOLUXO	4390 HUPOLUXO ROAD						
		BOX 134							
		LANIANA FL 339	Lantana FL 33462-3412			3. Date Incorporated or Qualified 12/06/1984 3a. Date of Last Report 02/06/1996			eport
	ace of Business	2a. Mailing Addr	ess	······································		4. FEI Number		Ap	plied For
21 JAME		26				59-2478730			t Applicable
Suite, Apt, #, etc. 22 # //6 City & Starte 23 A M E		Suite, Apt. #,	etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
		City & State				6. Election Campaign Financing	\$5.00 May Be Added to Fees		
23 7	Country	28 Zip	Т	Country		Trust Fund Contribution	<u>. Ll</u>		
24 AME 25 Sp. Name and Address of Curry		29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
					10. Name and Address of New Registered Agent				
RIFO	JL, JOAN			81	Name				······································
	B GREENTREE RD			02	Ctroot Ada	dress (P.O. Box Number is Not Acceptate	ala)		···
	NTON BEACH FL 33436		82 Street		Street Add	dress (P.O. Box Number is Not Acceptate	ole)		
	11,011 00 1011 1 0 00 100			83					
				84	City			85 Zip (Code
					<u> </u>		FL		
office or re	egistered agent, or both, in the St m familiar with, and accept the ot	ate of Etorida, Such char	ige was auth	horized by	the corpora	rporation submits this statement for the pation's board of directors. I hereby acception	pt the appoi	intment as	registered
agent. Lar	in tarinial with, this accept the or	ingations of accion our	.0303, Florid	ad Didicios	•				
SIGNATURE							0475		
SIGNATURE	Signerine hypostice product name of requirence	Lagavit and tille if applicable		legistered Age		uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND D	DIRECTOR	S IN 12
SIGNATURE	Signarie i spector product name of ingesteric OFFICERS	fagert and tile if applicated		tegistered Age		uired when relinstating) ADDITIONS/CHANGES TO OFFICE	CERS AND D	DIRECTOR Change	
SIGNATURE 12. TITLE	Signature typest or printed name of ingentions OFFICERS	fagert and tile if applicated	(NOTE R	13.		7'	CERS AND D		
SIGNATURE 12. TITLE NAME	Signative specific probabilization of agellers OFFICERS VD RIEDL, HENRY A.	fagert and tile if applicated	(NOTE R	13. 1.1 TITLE 1.2 NAME	nt signature requ	7'	CERS AND D		
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature by estar product name of regularis OFFICERS VD RIEDL, HENRY A. 4739 B GREENTREE RD	fagert and tile if applicated	(NOTE R	13. 1.1 TITLE 1.2 NAME 1.3 STREET	nt signature requ	7'	CERS AND D		
SIGNATURE 12. TITLE NAME	Signer en hyestor product name of ingestions OFFICERS VD RIEDL, HENRY A. 4739 B GREENTREE RD BOYNTON BEACH FL	Layer and the it applicated AND DIRECTORS	(NOTE R	13. 1.1 TITLE 1.2 NAME	nt signature requ	7'	CERS AND E		Addition
SIGNATURE 12. TITLE NAME SUBERT ADDRESS CHY-ST-ZIP	Signature by estar product name of regularis OFFICERS VD RIEDL, HENRY A. 4739 B GREENTREE RD	Layer and the it applicated AND DIRECTORS	(NOTE R	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S	nt signature requ	7'	CERS AND E	Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST- 20P TITLE	Signar en hyester product barre of regeleters OFFICERS VD RIEDL, HENRY A. 4739 B GREENTREE RD BOYNTON BEACH FL PDS	Layer and the it applicated AND DIRECTORS	(NOTE R	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S' 2.1 TITLE	ADDRESS	7'	CERS AND E	Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	OFFICERS VD RIEDL, HENRY A. 4739 B GREENTREE RD BOYNTON BEACH FL PDS RIEDL, JOAN PEAL	Layer and the it applicated AND DIRECTORS	(NOTE R	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S' 2.1 TITLE 2.2 NAME	ADDRESS ADDRESS ADDRESS	7'	CERS AND E	Change	Addition
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