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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Socretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name M15793

(6)

HIALEAH PLATING SHOP INC.

Principal Place	of Business	Mailing Address	Mailing Address				- 		SOU DIDILOIRIA FARI	
1640 WEST 33 PLACE HIALEAH FL 33012		1640 WEST 33 PLACE HIALEAH FL 33012								
							3. Date Incorporated or Qualified 3a 05/22/1985	n. Date of Last f 02/13/		
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-2537677 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 Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip 24	Country 25	Z(p)	Zip Co.		Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No Yes ☐ Y			
[24]	g. Name and Address of Curren		130	T			10. Name and Address of New Regis	tered Agent		
				81	N	ame				
HERNANDEZ, NELSIDO				82	S	treet Addre	ress (P.O. Box Number is Not Acceptable)			
	EST 40 PLACE NH FL 33012			83	-				· · ·	
				84	C	ity		FL 85 2	Zip Code	
familiar with	ad agent, or both, in the State of Florie h, and accept the obligations of, Sect Signature, typed or printed name of registered agent	on 607.0505, Florida Statu	tes.				d of directors. Thereby accept the appointn	DA ³ E	agent. I am	
12.	OFFICERS AN	D DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICER	RS AND DIRECT	ORS IN 12	
TITLE	PD	☐ DELETE	1 1 111					☐ Change	Addition	
NAME	HERNANDEZ, NELSIDO			1.2 NAME						
STREET ADDRESS	525 WEST 40 PLACE		1.3 STREET ADDRESS		AESS					
City-St-ZiP	HIALEAH FL	FIREIT	1.4 CITY - ST - ZIP		P		Change	Addition		
TITLE	STD	☐ DELETE		2 1 1/11.5				спану	, Moderno	
NAME	HERNANDEZ, MIRTHA 525 WEST 40 PLACE			2 2 NAME 2 3 STREET ADDRESS		no:ee				
STREET ADDRESS	HIALEAH FL				2 4 CITY - ST - ZIP					
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NAME		6.2 NAME 6.3 STREET ADDRESS			nnece		2,	2.25		
STREET ADDRESS	I		63	SIME	CLAN	nut 22		- '	` `	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6 4 CITY - ST- ZIP

SIGNATURE:

CITY-ST-ZIP

CR2E034 (12/95)