

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 MAY -1 PM12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M19153** (9)

1. Corporation Name

HITEK COMMUNITY CONTROL CORP.

100001476581
-05/04/95--01134--002
****800.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**800 N.W. 33RD STREET
POMPANO BEACH FL 33064**

Mailing Address
**800 N.W. 33RD STREET
POMPANO BEACH FL 33064**

3. Date Incorporated or Qualified
08/09/1985

3a. Date of Last Report
04/18/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0002288

Applied For
☐ Not Applicable

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

24 Country

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SONES, VICTOR K.
16106 N.E. 48 AVE.
N. MIAMI BEACH FL 33162**

81 Name **Michael N. Kreitzer, Esq.**

82 Street Address (P.O. Box Number is Not Acceptable)
100 Southeast 2nd Street

83 **17th Floor**

84 City **Miami** **FL** 85 Zip Code **33131**

11. Pursuant to the provisions of Sections 607.0501 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

Michael N. Kreitzer

4/28/95

12. OFFICERS AND DIRECTORS

11 TITLE **PD**
12 NAME **ANGULO, RICHARD**
13 STREET ADDRESS **800 NW 33RD STREET**
14 CITY, ST, ZIP **POMPANO BEACH FL**

15 TITLE **PD**
16 NAME **MATTHEWS, JAMES I**
17 STREET ADDRESS **800 NW 33RD STREET**
18 CITY, ST, ZIP **POMPANO BEACH FL**

19 TITLE **B**
20 NAME **BRAUN, KEITH**
21 STREET ADDRESS **800 NW 33RD ST**
22 CITY, ST, ZIP **POMPANO BCH FL**

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