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Apr 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # M74009 (5)

1. Corporation Name
HEARING AID CENTERS OF AMERICA, INC.



Principal Place of Business ** Note New address*
400 LAUREN DR
6751 S.W. 13TH STREET
INDIAN TRAIL NO 20079
US 7162 Forest Ridge Rd.
Weddington, NC 28105

Mailing Address
400 LAUREN DR
6751 S.W. 13TH STREET
INDIAN TRAIL NO 20079
US 7162 Forest Ridge Rd
Weddington, NC 28105

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 7162 Forest Ridge Rd.
Suite, Apt. #, etc.
22 City & State
23 Weddington, NC
24 Zip 28105
25 Country US

2a. Mailing Address
26 7162 Forest Ridge Rd
Suite, Apt. #, etc.
27 City & State
28 Weddington, NC
29 Zip 28105
30 Country US

3. Date Incorporated or Qualified
03/28/1988
4. FEI Number
65-0046776
Applied For
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. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, DONALD C.
6751 S.W. 13TH
PEMBROKE PINES

Don & Linda Smith
7162 Forest Ridge Drive
Weddington, NC
28105

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

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and State if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1. DPT
SMITH, DONALD C.
6751 S.W. 13TH STREET
PEMBROKE PINES FL
7162 Forest Ridge Rd
Weddington, NC 28105
2. DVS
SMITH, LINDA F.
6751 S.W. 13TH STREET
PEMBROKE PINES FL
7162 Forest Ridge Rd
Weddington, NC 28105
3. DELETE
4. DELETE
5. DELETE
6. DELETE
7. DELETE
8. DELETE
9. DELETE
10. DELETE
11. DELETE
12. DELETE
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE
Don & Linda Smith 11/15/98 716-246-0171

CR2E034 (10/97)