

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M96498**
1. Corporation Name
HAGEN AGRICULTURAL PARK CORP.

(4)



Principal Place of Business 2882 SMITH SUNDY ROAD DELRAY BEACH FL 33446 US	Mailing Address 2882 SMITH SUNDY ROAD 7085 AYRSHIRE LANE DELRAY BEACH FL 33446 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/30/1988	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0104823		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**WOLF, STEVE
2882 SMITH SUNDY ROAD
DELRAY BEACH FL 33446**

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. 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	1.1 TITLE	D
NAME	WOLF, STEVEN	1.2 NAME	WEISINGER, ALBERT
STREET ADDRESS	7085 AYRSHIRE LANE	1.3 STREET ADDRESS	1575 OCEAN LANE #278
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33316
TITLE	PD	2.1 TITLE	
NAME	LEGUM, E. WAYNE	2.2 NAME	
STREET ADDRESS	6284 W BOYNTON BCH BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BCH. FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 in an attachment with an address.

SIGNATURE:

Steve Wolf

1/29/98

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CR2E034 (10/97)