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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #1. Corporation Name M97590

(7)

HAFNER ACCOUNTING ASSOCIATES INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
Solid Applied For Country 2 2 3 3 3 3 3 3 3 3	,						(1501904 100 1004 1088 D)/(0 1010 1010 B)	Att Blått åtett bli	TE BIBLI ITOL
B. Pinicipal Place of Bueness 2. A Mailing Address 3. Date incorporated or Cellifer 3. Date incorporated or	1065 NE 125	1065 NE 125 ST	55 NE 125 ST						
## Pincipal Place of Business ## Amailing Address ## Amailing		FL 33328		#100			DO NOT WOITE IN THIS STACE		
Principal Place of Business Sa. Maleing Address Section Science Section Scie	US								
2.			00						
Suite Apt #, etc. 27 City & State City & State 29 Country 29 20 Country 20	2. Principal Pl	ace of Business	2a. Mailing Address					A	pplied For
Suite Apt #, etc. 27 City & State City & State 29 Country 29 20 Country 20	21		26	 			65-0070186		
City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State		#, etc.	Suite, Apt #, etc.					+	
20 Country Zip Country Zip Sign Country Zip Sign Trust Fund Cohmbution Change Country Variety Variety Zip Sign Country Variety V	22						5. Certificate of Status Desired		
2p	—————	•	—						
10 10 10 10 10 10 10 10		1 8		T 6-		· · · · · · · · · · · · · · · · · · ·			
### HAFNER, JOSEPH F. ### HAFNER, JOSEPH F. ### BILL DELETE ###	 _ `	— ´	-	├ ──	nuy				
HAFNER, JOSEPH F. 9481 S.W. 49TH PLACE COOPER CITY FL 33328 180 Sircel Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0507 into 607 1000 Formal distriction of the City	24			[30]					
### SW. 49TH PLACE COOPER CITY FL 33328 ### City	MAI				81	Name			
COOPER CITY FL 33328 B						D	(DO Do Number is No Association)		
11. Pursuant to the provisions of Sections 607 05.02 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 Lorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Lorida 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 Lorida Statutes. SIGNATURE SIGNATURE 12.					82	Street Adores	dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 05.02 and 607 15.08 Fibrids 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 Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes. Text		0, 5, 0, 1, 1, 5, 0, 0, 0, 0		ı	83				
11. Pursuant to the provisions of Sections 607 05.02 and 607 15.08 Fibrids 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 Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes. Text			•	- 1		~			~
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, and accept the obligations of, Section 607 0505, Florida Statules. SIGNATURE					84	City	F	L 85 ZIP	Code
12.	office or re	egistered agent, or both, in the State	of Florida, Such change was a	authorized	d by ti	named corpo he corporatio	ration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing ppointment as	its registered s registered
TILLE D DELETE SITURE DELETE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND DIRECTORS IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS AND IN 12 TILLE D DELETE STREET ADDRESS DATE OFFICERS DATE	SIGNATURE								
TITLE					Agent	signature required			iBS IN 12
MARE HAFNER, JOSEPH F. 12 NAME STREET ADDRESS 9481 S.W. 4971 PLACE 13 STREET ADDRESS 14 CPTY-ST-ZIP					ri F	—-т	ADDITIONAÇÃI ANADES TO OT TODATO		
STREET ADDRESS 9481 S.W. 49TH PLACE 13 STREET ADDRESS 14 CITY-ST-ZIP	l .	•							
COOPER CITY FL						ODAESS			
TITLE	l I	*							
STREET ADDRESS 9481 S.W. 49TH PLACE 23 STREET ADDRESS 2 4 CITY-ST-ZIP			DELETE					Change	Addition
COOPER CITY FL	NAME	HAFNER, SHARON A.		2.2 N		ĺ			
TITLE	STREET ADDRESS	9481 S.W. 49TH PLACE	235		2.3 STREET ADDRESS				
NAME	CITY-ST-ZIP	COOPER CITY FL		2 4 0	IY-ST-	- ZIP	•		
STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 STREET ADDRESS 3.5 S			DELETE	3 1 TIT	ILE			Change	Addition
CITY-ST-ZIP	NAME			3 2 NA	ME				
TITLE	STREET ADDRESS		•	3.3 ST	REET AL	DDRESS			
NAME	CITY-ST-ZIP			3.4. CI	TY-ST-	ZIP			
STREET ADDRESS	TITLE	· -	☐ DELETE	4.1 111	TLE			LJ Change	∐ Addition
A CITY-ST-ZIP	NAME			4 2 N	AME	1			
TITLE DELETE 5 1 TITLE Change Addition NAME 5 2 NAME 5 2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP Addition NAME 62 NAME	STREET ADDRESS			4.3 ST	REET AC	odress [
STREET ADDRESS 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition Addition AMME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 CITY-ST-Z						ZIP			1 4400
STREET ADDRESS	l I		L_J DELETE					Change	III ADDITION
CITY-ST-ZIP 5 4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY-ST-ZIP	l I			1					
TITLE DELETE 6 1 TITLE Change Addilion NAME 6 2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY-ST-ZIP	l I					1			
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP			Driete			ZIP	·	Chance	Addition
STREET ADDRESS CITY-ST-ZIP 6.9 STREET ADDRESS 6.4 CITY-ST-ZIP	l		L'1 DECEIE					Change	L. Addition
CITY-ST-ZIP 6.4 CITY-ST-ZIP	l I								
	l					1			
		ertify that the information supplied w	ath this filing does not qualify for				Section 119 07(3)(i) Florida Statutes further	certify that th	e 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.

429/98