

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra D. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 20 AM 9:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P05004

(7)

1. Corporation Name

HOOVER INDUSTRIES, INC

Principal Place of Business

C/O STEVE BASINSKI  
7260 NW 68TH ST  
MIAMI FL 33166  
US

Mailing Address

C/O STEVE BASINSKI  
7260 NW 68TH ST  
MIAMI FL 33166  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified  
02/13/1985

3a. Date of Last Report  
05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

7260 NW 68th ST

City & State

MIAMI FL

Zip

33166

Country

USA

2a. Mailing Address

26

Suite, Apt. #, etc.

7260 NW 68th ST

City & State

MIAMI FL

Zip

33166

Country

USA

4. FEI Number

13-2749292

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 has liability for intangible tax under S. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GAMMILL, WARREN P  
1101 BRICKELL AVE.  
SUITE 1700  
MIAMI FL 33131

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 relocating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

BASINSKI, J. STEPHEN

STREET ADDRESS

7260 N.W. 68TH STREET

CITY - ST - ZIP

MIAMI FL

TITLE

C

NAME

MILLER, DAVID D

STREET ADDRESS

7260 N.W. 68TH STREET

CITY - ST - ZIP

MIAMI FL

TITLE

A

NAME

FERNANDEZ, JULIO

STREET ADDRESS

7260 N.W. 68TH STREET

CITY - ST - ZIP

MIAMI FL

TITLE

CD

NAME

BROWN, BERNARD

STREET ADDRESS

7260 N.W. 68TH STREET

CITY - ST - ZIP

MIAMI FL

TITLE

D

NAME

GLANTZ, MAXWELL

STREET ADDRESS

7260 N.W. 68TH STREET

CITY - ST - ZIP

MIAMI FL

TITLE

DS

NAME

SCOVOTT, CHRISTOPHER

STREET ADDRESS

7260 N.W. 68TH STREET

CITY - ST - ZIP

MIAMI FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

V

1.2 NAME

HERRERA, RAUL

1.3 STREET ADDRESS

7260 NW 68th ST

1.4 CITY - ST - ZIP

MIAMI FL 33166

☐ Change

☒ Addition

2.1 TITLE

V

2.2 NAME

MILLER, DAVID D

2.3 STREET ADDRESS

7260 NW 68th ST

2.4 CITY - ST - ZIP

MIAMI FL 33166

☒ Change

☐ Addition

3.1 TITLE

V

3.2 NAME

FERNANDEZ, JULIO

3.3 STREET ADDRESS

7260 NW 68th ST

3.4 CITY - ST - ZIP

MIAMI FL 33166

☒ Change

☐ Addition

4.1 TITLE

V

4.2 NAME

HIRSCH, DAVID E

4.3 STREET ADDRESS

7260 NW 68th ST

4.4 CITY - ST - ZIP

MIAMI FL 33166

☐ Change

☒ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

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 included 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 in changed, or added, or deleted, or corrected with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID E. HIRSCH, VP

4/10/95

305-888-9791