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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P92000012506 (1) HAR BROKERAGE, INC.

**FILED** Feb 25 1998 8:00am

Principal Place	of Business	Mailing Add	lress		,		andrender tid ibrim tratt detet mart		11E 11MB1 E1111 ##1	HB 440 1461
1900 CONSUL	LATE PLACE	1900 CONSULATE PLACE								
APT 603	REACH EL 29404	APT 603 WEST PALM BEACH FL 33401				İ	DO NOT WR	ITE IN THIS	SPACE	
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3				Ji		1 Dat	e Incorporated or Qualifie		OI AGE	
	-					12	2/17/1992			
	ace of Business	2a. Mailing	Address			1	Number		h	oplied For
21	4 -10	26					65-037 <u>77</u> 26			ot Applicable
Suite, Apt.	#, EIC	27	Suite, Apt. #, etc.			<b>6.</b> Cer	tificate of Status Desired		\$6.75 / Fee Re	Additional equired
City & State		City & S	City & State			6. Elec	ction Campaign Financing		\$5.00	May Be
23		28		_		Tru	st Fund Contribution		Added	to Fees
Zıp	Country	Zip		Country			s corporation owes or has			
24	25	29	30	<u> </u>			sonal Property Tax due Ju			No
	g, Name and Address of Currer	it Registered Age	ent			10. Na	me and Address of New	Registered	Agent	
	TH, SOL J			81	Name					-
	OO CONSULATE PLACE			82	Street A	ddress (P.O. I	Box Number is Not Accep	table)		
WE	ST PALM BEACH FL 33401			83					· · · · · · · · · · · · · · · · · · ·	
				84	City		<u></u> -	FL	85 Zip (	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508.	Florida Statutes.	the above	-named c	corporation su	bmits this statement for th			ls registered
office or re	egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida, Such (	change was auth	orized by	the corpo	oration's board	d of directors. I hereby ac	cept the ap	pointment as	registered
	л таліваг with, апо ассерт тір овіц	aions or, socion	007.0505, Florida	a Statutes	٠.					
SIGNATURE	Signature, typod or printed name of eige-fered age	enciarnal titles it appplication	(NOTE BE	g stered Age	nt signature n	equired when reinst	aling)	DATE		····
12.	OFFICERS AN			13.		ADD	ITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	IS IN 12
TITLE	PD	T	DELETE	1.1 TITLE					Change	Addition
NAME	ROTH, SOL J			12 NAME						].
STREET ADDRESS	1900 CONSULATE PLACE AF	PT 603		1.3 STREET	ADDRESS					
CITY-ST-ZIP	West Palm Beach Fl			1.4 CITY-S	T-ZIP			4		
TITLE	D		DELETE	2 1 TITLE					Change	Addition
NAME	ROTH, HARRIET			2.2 NAME						
STREET ADDRESS	1900 CONSULATE PLACE AI			2.3 STREET	ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL 3340	)1		2. 4 CITY - 5	T-ZIP					
TITLE	8		DELETE	3 1 TITLE					Change	☐ Addition
NAME [	ROTH, ROCHELLE		į	32 NAME						
STREET ADDRESS	2751 CHESTERTON DROAD			3.3 STREET	ADDRESS					
CITY-ST-ZIP	SHAKER HEIGHTS OH			3.4. CITY - S	T-ZIP					
TITLE	T	Ξ.	DELFTE	4.1 TITLE				· <u> </u>	☐ Change	☐ Addition
NAME	CREPS, DAVID T.			4. 2 NAME						1
STREET ADDRESS	2608 FOXDEN			4.3 STREET	address					Į
CITY-ST-2IP	HUDSON OH			4.4 CITY-S	T-21P					
TITLE			DELETE	5 1 TITLE					Change	Addition
NAME				52 NAME	ļ					
STREET ADDRESS				5 3 STREET	ADDRESS					
CITY-ST-ZIP			_	5 4 CITY-S	T-ZIP					
TITLE			DELETE	6 1 TITLE				-	Change	Addition
NAME				6.2 NAME						1
STREET ADDRESS				6.3 STREET	address					
CITY-ST-ZIP		·		6.4 CITY - S	T-ZIP					

es not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in