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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 16 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000043548 (5)

ERIN K HILL, INC.

STREET ADDRESS CITY-ST-ZIP

Principal Plac 3540 8W 15 8 FT. LAUDERDA	T	Mailing Address 3540 SW 15 ST FT. LAUDERDALE FL 33312-	3513		
				3. Date Incorporated or Qualified 06/14/1993	3a. Date of Last Report 02/13/1996
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0430708	Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	9. Name and Address of Curre		00	Florida Statutes 10. Name and Address of New Regi	Yes No
HUI	L, ERIN K	iit negisteleti Agetit	81 Name	10. Name and Address of New Year	istered Agent
	0 SW 15 ST		82 Street Addr	ess (P.O. Box Number is Not Acceptable	2)
FT.	LAUDERDALE FL 33312			Cos (F.O. Dox Number is Not Not place	
			B3		
			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, typod or printed riamo of registered ag	ent and title it applicable (NOTE:	Registered Agent signature require	od when reinstating)	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D HILL, ERIN K	L.) DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	3540 SW 15 ST		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		1.4 CiTY-ST-ZIP		
TITLE		DELETE	21 TRLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	<u></u>		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		_	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	,		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		[
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
HILE		Doctor	O.I THEE		C outside T Worthou

14. I do 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.