SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 24 AM 11:11

DOCUMENT # **P93000049449 (0)**

1. Corporation Name
HIDECO INTERNATIONAL INC.

Principal Place of Business	Mailing Address
7208 NW 56 ST. MIAMI FL 33166	7208 NW 56 ST. MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/15/1993
3a. Date of Last Report: 11/07/1994

2. Principal Place of Business — 21: 5615 NW 74 AV
2a. Mailing Address — 26: same
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27: //
City & State — 23: MIAMI FLA
City & State — 28: //
Zip — 24: 33166
County — 25: USA
Zip — 29: //
County — 30: //

4. FEI Number: 65-0431446 ☐ 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 security interests in tangible tax credits under s. 195.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HINDS, GREGG
23144 POST GARDENS WAY
SUITE 518
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City **FL** 05 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: Gregg Hinds — 6/14/95
Signature of new or prior registered agent and title if applicable (NOTE: Registered Agent signature required when executing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, DELETIONS AND/OR ADDRESS CHANGES	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	HINDS, RONALD B	12 NAME	
STREET ADDRESS	15920 W PRESTWICK PL	13 STREET ADDRESS	
CITY ST ZIP	MIAMI LAKES FL 33014	14 CITY ST ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	HINDS, MIRIAM S	22 NAME	
STREET ADDRESS	15920 W PRESTWICK PL	23 STREET ADDRESS	
CITY ST ZIP	MIAMI LAKES FL 33014	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	HINDS, GREGG	32 NAME	
STREET ADDRESS	23144 POST GARDENS WAY, S-518	33 STREET ADDRESS	
CITY ST ZIP	BOCA RATON FL 33433	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	HINDS, RICK	42 NAME	
STREET ADDRESS	14422 ROSEWOOD RD	43 STREET ADDRESS	
CITY ST ZIP	MIAMI LAKES FL 33014	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

CR2E034 (3/95)

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 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: Gregg Hinds — 6/19/95 — 305-887-4244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0066844 CP