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

**PROFIT CORPORATION** ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P93000088081 (3)

## **FILED** Jul 08 1998 8:00am Secretary of State

HARD	ding PLA	VCE,	INC.									
	j.									1 1077/701 1/0 (2/00 1)/// 02/11 02/11 02/11 02/11		1 1810   110   120
						l						
Principal Plac	ce of Busine	55		M	alling Address						ASIBI IBILI BAIDI	1 19193 1191 1891
342 N.W. 106TH TER. 342 N.W. 106TH TER.												
PEMBROKE PINES FL 33026					PEMBROKE PINES FL 33026				DO NOT WRITE IN THIS SPACE			
										3. Date Incorporated or Qualified	OF FIDE.	
										12/20/1993		
2. Principal Place of Business					2a. Mailing Address					4. FEI Number	I A	pplied For
21				26						65-0470067	N	ot Applicable
Suite, Apt.	#, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	<b>+</b>	Additional
22					27							tequired
City & State				12.1	City & State					6. Election Campaign Financing		May Be
Zip		-r	Country	28	Zip		ountry			Trust Fund Contribution		to Fees
24		25	Couring	29	247	30	Coritiy			This corporation owes or has paid the corporate Personal Property Tax due June 30.		ntangible No
24	9. Name		Address of Curren		tered Agent	30	т-			10. Name and Address of New Registered		<u> </u>
Т	ERRELL, F				·		81	Name	·			
	142 N.W. 1				8			C+	A .l .l	- (DO Bankline)		
PEMBROKE PINES FL 33026								Street	Addres	ss (P.O. Box Number is Not Acceptable)		
I SINGIFICATE TRICOTE GOODS										· · · · · · · · · · · · · · · · · · ·		
1							84	Oitu				0-4-
							04	City		FI	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, to office or registered agent, or both, in the State of Florida. Such change was authogent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida.								e-named	corpo	ration submits this statement for the purpose	of changing i	ils registered
agent. La	am <b>fam</b> iliar v	yenı, vilh, a	nd accept the obliga	ations of	, Section 607.0505, i	Florida S	talutes	ine cor	) Doratio	on's board of directors. I hereby accept the ap	pointment as	s registered
SIGNATURE Rosemany Terrell Roll and the land the												
	SIGNATURE TYPE	የ እና ውጥ				OTE: Rogist		nt signatur	e required	d when reinstating) DATE		
12.			OFFICERS ANI	L) L)R(L,C	DELETE	1;	TITLE		1	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR  Change	RS IN 12 Addition
NAME		IISTO	CLEOUS, MADLE	INF			NAME				□ change	Addition
	STREET ADDRESS 2247 POLK ST.							1.3 STREET ADDRESS				Į
CITY-ST-ZIP			OD FL 33020				CITY-S					[
TITLE	D		<del></del>		DELETE		TITLE	1 - EII	<del> </del>		Change	Addition
NAME	THEM	IISTO	CLEOUS, SAVVA	S	<del>_</del>		NAME					
STREET ADDRESS	2247			•		2.3	STREET	ADDRESS				]
CITY-ST-ZIP			OD FL 33020				4 CITY - S					į
TITLE	0				DELETE		TITLE				Change	Addition
NAME	TERR	ELL,	ROSEMARY			3.2	NAME					ļ
STREET ADDRESS	1		06 TERRACE			3.3	STREET	ADDRESS	77	20 N. W. 12 Street		ł
CITY-ST-ZIP	PEMB	ROK	E PINES FL			3.4	CITY-S	1 - ZIP		embroka Pines, FL 330	24	
TITLE					DELETE	4.1	TITLE				Change	Addition
NAME						4. :	2 NAME					
STREET ADDRESS						4.3	STREET.	ADDRESS				
CITY-ST-ZIP	<del></del>					4.4	CITY-S1	T-71P				
TITLE					∐ DELETE	5.1	TITLE				☐ Change	☐ Addition
NAME						5.2	NAME					
STREET ADDRESS						5.3	STREET	ADDRESS				
CITY - ST - ZIP	<del></del>						CITY-SI	1 - ZIP	ļ			
TITLE					L_ DELETE	1	THILE				☐ Change	☐ Addition
NAME							NAME					
STREET ADDRESS	=							ADDRESS				
CITY-ST-ZIP	acutiku that ti	o inte	greation expedied wi	a. n 6	Con data and marks	6.4	CITY-S1		l od in O	notion 110 07/9/i) Elevido Stotutos I futbor o	and the share of the	- Information

I 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 informatio indicated on this annual report or supplemental argual 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address.

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