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Jun 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P94000002277 (9)

1. Corporation Name
CDHC, INC.



Principal Place of Business
701 NE 77 STREET
MIAMI FL 33138

Mailing Address
701 NE 77 STREET
MIAMI FL 33138-5214

3. Date Incorporated or Qualified 01/03/1994	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0564835	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
Country	Country
24	29
25	30

9. Name and Address of Current Registered Agent
HYLTON, CECIL D III
2192 N.E. 122ND ROAD
N. MIAMI FL 33181

10. Name and Address of New Registered Agent

B1 Name	Hylton Cecil D. III
B2 Street Address (P.O. Box Number is Not Acceptable)	701 NE 77 St.
B3	
B4 City	Miami, Fl.
B5 Zip Code	FL 33138

Change of address →

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HYLTON, CECIL D III	
STREET ADDRESS	2192 N.E. 122ND ROAD	
CITY-ST-ZIP	N. MIAMI FL 33181	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HYLTON, RICHARD D	
STREET ADDRESS	2192 N.E. 122ND ROAD	
CITY-ST-ZIP	N. MIAMI FL 33181	
TITLE		<input type="checkbox"/> DELETE
NAME	Hylton, Cecil D. Jr.	
STREET ADDRESS	701 NE 77 ST	
CITY-ST-ZIP	MIAMI, FL - 33138	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Hylton, Cecil D. III	
1.3 STREET ADDRESS	701 NE 77 St.	
1.4 CITY-ST-ZIP	Miami, Fl. 33138	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Hylton, Richard D.	
2.3 STREET ADDRESS	701 NE 77 St.	
2.4 CITY-ST-ZIP	Miami, Fl. 33138	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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: Cecil D. Hylton, Jr. Pres. *Cecil D. Hylton* 4-28-97 305-757-8605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)