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Jun 17 1997 8:00am

Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000006085 (2)

1. Corporation Name

THE HARMELING GROUP, INC.

Principal Place of Business

Mailing Address

80 BRIGADE ST
CHARLESTON SC 29403

P.O. BOX 22796
CHARLESTON SC 29413-2796
US

3. Date Incorporated or Qualified
01/18/1994

3a. Date of Last Report
05/02/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

PO BOX 330477

27

Suite, Apt. #, etc.

28

ATLANTIC BEACH, FL

29

Zip

Country

30

4. FEI Number

59-3228885

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAGATHAN, WALLY
540 BRICKELL KEY DRIVE
APT 1428
MIAMI FL 33131

ADDRESS
CHANGE ONLY

81 Name

MAGATHAN, WALLY

82 Street Address (P.O. Box Number is Not Acceptable)

601 BRICKELL KEY DRIVE

83

SUITE 500

84 City

MIAMI

FL

85 Zip Code

33131

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D HARMELING, JOHN T
STREET ADDRESS 80 BRIGADE ST
CITY-ST-ZIP CHARLESTON SC 29403

TITLE ☐ DELETE

NAME D HARMELING, JOHN T III
STREET ADDRESS PO BOX 22796 N/A
CITY-ST-ZIP CHARLESTON SC 29413

TITLE ☐ DELETE

NAME D HARMELING, SCOTT L
STREET ADDRESS PO BOX 22796 N/A
CITY-ST-ZIP CHARLESTON SC 29413

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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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

[Signature]

4/18/07

CR2E034 (9/96)