

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

55 MAY -1 PM 2:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathison  
Secretary of State  
DIVISION OF CORPORATE AFFAIRS

**DOCUMENT # P94000039417 (8)**

1. Corporation Name  
**H-FLOW RESEARCH & PERFORMANCE, INC.**

Principal Place of Business: **2622 NW 33RD ST APT. 2015 FT. LAUDERDALE FL 33309**  
Mailing Address: **2622 NW 33RD ST. APT. 2015 FT. LAUDERDALE FL 33309**

2. Previous Fiscal Year: **21**  
3a. Mailing Address: **26**  
4. City, Apt. #, etc.: **22**  
5. State: **23**  
6. City & State: **24**  
7. State: **25**  
8. City, State, Zip: **29** **30**

3. Type (reorganized or liquidated): **05/23/1994**  
3b. Date of Last Report  
4. FEI Number: **65-0475989**  
Applied For:  Applied For:   
Not Applicable:  Not Applicable:   
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing:  **\$5.00 May Be Added to Fees**  
7. This corporation has liability for information under Chapter 119, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**HAYES, MARC E  
2622 NW 33RD ST.  
APT. 2015  
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent  
B1 Name:  
B2 Street Address (P.O. Box Number is Not Acceptable):  
B3:  
B4 City: **FL** B5 Zip Code:

11. Pursuant to the provisions of Sections 607.01(2) and 607.1409, Florida Statutes, the above named corporation submits the 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, hereby, accept the appointment of registered agent. This Form will not accept the provisions of Section 607.01(2), Florida Statutes.

SIGNATURE: \_\_\_\_\_  
Name of Registered Agent: \_\_\_\_\_  
Name of Registered Agent: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

12a. TITLE	DPST
12b. NAME	HAYES, MARC E
12c. STREET ADDRESS	2622 NW 33RD ST., APT. 2015
12d. CITY, STATE, ZIP	FT. LAUDERDALE FL 33309
12e. TITLE	
12f. NAME	
12g. STREET ADDRESS	
12h. CITY, STATE, ZIP	
12i. TITLE	
12j. NAME	
12k. STREET ADDRESS	
12l. CITY, STATE, ZIP	
12m. TITLE	
12n. NAME	
12o. STREET ADDRESS	
12p. CITY, STATE, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (If Any)

13a. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13b. NAME		
13c. STREET ADDRESS		
13d. CITY, STATE, ZIP		
13e. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13f. NAME		
13g. STREET ADDRESS		
13h. CITY, STATE, ZIP		
13i. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13j. NAME		
13k. STREET ADDRESS		
13l. CITY, STATE, ZIP		
13m. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13n. NAME		
13o. STREET ADDRESS		
13p. CITY, STATE, ZIP		

14. The filer hereby certifies that the information supplied with this filing is voluntarily prepared and does not qualify for the exemption stated in Section 139.102(1)(b), Florida Statutes. I further certify that the information is believed to be true and correct as of the date of filing and that the signatories shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the partner or partner empowered to execute this report as required by Chapter 139, Florida Statutes, and that my name appears on Block 1, on Block 13 of a filing, or on an alternate filing with an address.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

3-13-95 305 739-0550