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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000039907 (8)

FILED Jan 29 1998 8:00am Secretary of State

1. Corporation					
HEN	ERPRISES, INC.				******
		•			
Principal Plac	e of Business	Mailing Address		—]
l '		<u>-</u>			
3109 GRAND AVE 3109 GRAND AVE MIAMI FL 33133 MIAM					
US	100	US		DO NOT WRITE IN THI	S \$PACE
				3. Date Incorporated or Qualified	
				05/19/1994	
·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0492524	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		or communication distributions	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country	28	Carrata	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the o	
24	9. Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
et.		an regiotered Agent	81 Name	In remis and womess of Mem Bedistere	a vilent
	INSON, LOUIS JR		o. Halle		
	75 PONCE DE LEON BLVD	•	82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	ITE 305		83		
L.C.	PRAL GABLES FL 33146				
			84 City	F	85 Zip Code
44 Dureugot	to the provisions of Sections 607.05	02 and 607 1509 Florida Statuta	us the above named corn		
office or r	egistered agent, or both, in the Stat	e of Florida. Such change was a	uthorized by the corporati	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the statement of the purpose on the purpose of the p	ppointment as registered
agent. La	m familiar with, and accept the obli	gations of, Section 607.0505, Flo	rida Statutes.		-
SIGNATURE	Signature, typed or printed name of registered a	nest and this if continoble	: Registered Agent signature require	ed when reinstating) DATE	. <u></u>
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIBECTORS IN 12
TITLE	D	DELETE	1,1 TITLE	, 15511161161617 WIGGO 15 6111621167	☐ Change ☐ Addition
NAME	HEFLIN, ROD		1,2 NAME		-
STREET ADDRESS	6641 SW 85TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33143		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-2IP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
City-St-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4,1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TIYLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		