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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DIVISION OF DOCUMENT # P95000037590 (3)

H-BROS. INC.

Principal Place of Business

Mailing Address

1672 S.W. 131 PLACE CIRCLE EAST MIAMI FL 33175 1672 S.W. 131 PLACE CIRCLE EAST MIAMI FL 33175-1204

FILED Jan 22 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified 05/11/1995 3a. Date of Last Report 08/22/1996	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For	
21 26						<b>65-0580932</b> Not Applicable	
Suite Ant	#, etc	Suite, Apt. #, etc.	27			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cou	Country		8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29	30	0		Florida Statutes	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
VIEIRA, HEDILSON 81					Name		
1672 S.W. 131 PLACE CIRCLE EAST MIAMI FL 33175				82 Street Address (P.O. Box Number is Not Acceptable)			
				Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84	City	FL 85 Zip Code	
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 fam fam fam with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or profed trasse of regiment a signature to a signature of the Lapplication (NOTE Registered Agent signature required when reinstating)  DATE  Output  DATE							
12.		D DIRECTORS	13.	<del></del> -	***************************************	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	DELETE	1.1 Ti	⊺L€		Change Addition	
NAME	VIEIRA, HEDILSON		1.2 N	AME			
STREET ADDRESS	1872 S.W. 131 PLACE CIRCLI	E EAST	1.3 S	REET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33175			1,4 CITY - ST ZIP			
TIFLE	DELETE			2 1 TITLE		Change Addition	
N4ME			22N	AME			
STREET ADDRESS	S5.		235	23 STREET ADDRESS			
CITY - S1 - ZIP			2 4 0	2 4 CITY - ST - ZIP			
Tifus	DELETE			3 1 TITLE		Change Addition	
NAME				AME	1		
STREET ADDRESS			33 S	3 3 STREET ADDRESS			
CITY - ST - ZIP			34.0	HY-5	ST-ZIP		
Tit.F	DELETE 4.1 T		TLE		Change Addition		
NAME			4.21	AME			
STREET ACORESS			4.3 S	TREET	ADDRESS		
CITY-ST-7P			4.4 C	ITY - \$	IT-ZIP		
TITLE	DELETÉ 5.1 T		TLE		Change Addition		
NAME			5.2 N	AME			
STREET ADDRESS			5.3 \$	TREET	ADDRESS		
CHY-ST ZIF			5 4 C	ITY-S	ST - ZIP		
TITLE		DELETE 611				Change Addition	
NAME			6.2 N	AME			
STREET ADDRESS	}		II.		ADDRESS		
CITY-ST ZIP					ST - ZIP		
	L	a with this filipp slope not avail				ed in Section 119 07(3\(i)) Florida Statutes. I further certify that the	

i. 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 effect 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 charging or on an infactiment with an address.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/13/94 305 3771930