

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # *P93000066370 (4)*

1. Corporation Name

H.W. AGENCY INC.

Principal Place of Business

*685 NW 76TH MANOR
PARKLAND, FL 33067*

Mailing Address

*6185 NW 76TH MANOR
PARKLAND, FL 33067*

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2n. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

*HUGH G. WEILL
6185 NW 76TH MANOR
PARKLAND, FL 33067*

3. Date Incorporated or Qualified

8-28-95

4. FEI Number

65-0614621

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

10. Name and Address of Now Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.040 and 607.1408, 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, type or printed name of registered agent and the agent's title

(If not, the agent's signature required when agent dies)

(Date)

12. OFFICERS AND DIRECTORS

TITLE *PRES.*
NAME *HUGH G. WEILL*
STREET ADDRESS *6185 NW 76TH MANOR*
CITY-STATE-ZIP *PARKLAND, FL 33067*

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 any attachment to this report.

SIGNATURE: *x*

Hugh G. Weill

x 4/23/98

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