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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name
HORMAC, INC.

P95000072739 (2)

FILED
May 20 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address						a tadilides tra sasal Bistr gabits beitt adent davit seens store seens titte sen fabr	
4360 NORTHLAKE BOULEVARD 4360 NORTHLAKE BOULE							
SUITE 205 SUITE 205						DO ALOT MOUTE IN TAILS OF A OF	
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS)		DO NOT WRITE IN THIS SPACE	$\overline{}$
						3. Date Incorporated or Qualified	
9 Principal P	loos of Rusinees	2a, Mailing Address				09/18/1995 4. FE! Number Applied For	
and the same was						4. FEI Number Applied For Not Applied For	
21 Suite, Apt.	# etc	Suite, Apt. #, etc.				\$9.75 Additional	
22 27			The in, otto			5. Certificate of Status Desired Fee Required	- [
City & State	9	City & State				6, Election Campaign Financing \$5.00 May Be	╡
23		28				Trust Fund Contribution Added to Fees	
Zip				iniry		8. This corporation owes or has paid the current year Intagetible	╗
24	25 29 30					Personal Property Tax due June 30. Yes No	l
	g. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registered Agent	
WASHOFSKY, MARTIN E EA P.A.					Name		
4360 NORTHLAKE BOULEVARD				82	Street Add	Address (P.O. Box Number is Not Acceptable)	\dashv
SUITE 205						Table of the second sec	
PA	LM BE ACH GARDENS FL 334 [.]	10		83			
				84	City	85 Zip Code	\dashv
						FL	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Sta	tutes, the a	bove	-named co	corporation submits this statement for the purpose of changing its registere poration's board of directors. I hereby accept the appointment as registered	ď
agent. La	m familiar with, and accept the ob-	igations of, Section 607.0505,	Florida Sta	tutes	i tile corpora S.	portation's board of directors, thereby accept the appointment as registered	•
SIGNATURE							1
Ĺ	Signature, typed or panied name of registered			d Age	nt signature requ	required when reinstating) DATE	F
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
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14. Thereby 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

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4/20/18

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