## 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

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DOCUMENT # P95000074834 (9)

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HUTCHINSON HOLDINGS CORP.

Principal Place of Business Mailing Address 6341 HUTCHINSON RD. 8341 HUTCHINSON RD. MIAMI LAKES FL 33014 MIAMI LAKES FL 33014-2301 3. Date Incorporated or Qualified 3a. Date of Last Report 09/28/1995 03/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0612561 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 22 City & State City & State 6. Election Campaign Financing

Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 🔀 Yes 🔲 No 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MENA, MARIO Name 6341 HUTCHINSON RD. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI LAKES FL 33014-83 City 65 Zip Code

Trust Fund Contribution

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signary. Typicities printed name of registered agent and fille it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 111.6 1.1 TITLE MENA, MARIO 1.2 NAME NAM 6341 HUTCHINSON RD. 1.3 STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33014 1.4 CITY - ST - ZIP CHY-\$1-76 SVD DELETE 21 TITLE Change Addition HILE MENA, JUSTA 2.2 NAME NAM 6341 HUTCHINSON RD. STHEET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 33014 2 4 CITY-ST-ZIP Dity - St - ZIP Addition DELETE Change THE 3 1 TITLE NAM 3.2 NAME STREET ADDRESS 33 STREET ADDRESS 34. CITY-ST-ZIP CHY-S1 ZP Addition DELETE Change Change 4.1 TITLE 1911 4. 2 NAME HAND SPREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CRY-ST-20 DELETE Change Addition THLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS C TY - S1 - ZIP 5.4 CITY - \$T - 2IP Addition DELETE 6 1 TITLE ☐ Change THE 6.2 NAME NAVE STREET ADDRESS 63 STREET ADDRESS 6 4 CITY-ST-ZIP

14. 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 the agricult am an officer or director of the companies in Rhack 12 in Block 1300 prort or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that a thorn 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 ged, or on an attachment with an address.

SIGNATURE:

MATER REQUIRE NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone # 0120699

FILED

Apr 16 1997 8:00am

Secretary of State

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

96/6)