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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600001021 (0)

HURST CORPORATION

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business 200 SOUTH BISCATINE BLVD. 5680 NW 35TH AVE MIAMI FL 33142 SUITE 900-MIAMI FL - 23131 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/04/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 26 65-0636319 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes □ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARCIA, JOSE L 5660 NW 35 AVE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33142** в3 84 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if upplicable (NOT) Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE GARCIA, JOSE L NAME 1.2 NAME 14454 SW 84TH ST 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP **VPST** DELETE Change Addition TITLE 2.1 TITLE GARCIA, IVONNE D NAME 2.2 NAME 14454 SW 84TH ST STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 2 4 CITY-ST-ZIP

CITY-ST-ZIP 6.4 CITY - \$1 - ZIP 14. I 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with the information stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with the information stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with the information stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certificated in Section 119.07(3)(ii), Florida Statutes. I further certificated in Section 119.07(3)(ii), Florida Statut

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6.1 TITLE

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4.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

3.4. CITY - ST - ZIP

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FILED

May 01 1998 8:00am

Secretary of State

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