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FILED

Apr 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000016870 (3)

1. Corporation Name  
HARNAL, INC.



Principal Place of Business

8547 CYPRESS PARKWAY  
#J-5  
BOYNTON BEACH FL 33437

Mailing Address

8547 CYPRESS PARKWAY  
#J-5  
BOYNTON BEACH FL 33437

2. Principal Place of Business

21 1970-72 LAKE WORTH RD  
Suite, Apt. #, etc.

22 City & State  
23 LAKE WORTH FL

24 Zip 33461 Country

2a. Mailing Address

26 1970-72 LAKE WORTH RD  
Suite, Apt. #, etc.

27 City & State  
28 LAKE WORTH FL

29 Zip 33461 Country

3. Date Incorporated or Qualified

02/23/1996

3a. Date of Last Report

4. FEI Number

65-0645725

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

HARNAL, UMESH S  
8547 CYPRESS PARKWAY  
J-5  
BOYNTON BEACH FL 33437

10. Name and Address of New Registered Agent

81 Name HARNAL UMESH S  
82 Street Address (P.O. Box Number is Not Acceptable)  
1970-72 LAKE WORTH ROAD  
83  
84 City LAKE WORTH FL 85 Zip Code 33461

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 applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME HARNAL, UMESH S  
STREET ADDRESS 8547 CYPRESS PARKWAY J-5  
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 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 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

SIGNATURE REQUIRED

4/29/97

571-586-6586

CR2E034 (9/96)