

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Sep 19 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 # P96000043187 (9)

1. Corporation Name

HURRICANE WAREHOUSE LOGISTICS, INC.

Principal Place of Business

1300 S.W. 2ND ST.
POMPANO BEACH FL 33069

Mailing Address

P.O. BOX 10464
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1996

3a. Date of Last Report

4. FEI Number

65-0681448

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 5535 A N. W. 35th Av.

Suite, Apt. #, etc.

22 Building 15

City & State

23 Ft. Lauderdale, FL

Zip

24 33309

Country

25 U.S.A.

2a. Mailing Address

26 P. O. Box 10464

Suite, Apt. #, etc.

27

City & State

28 Pompano Beach, FL

Zip

29 33061-6464

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

KIRKPATRICK, JOANN
1300 S.W. 2ND STREET
POMPANO BEACH FL 33069

81 Name

JoAnn Kirkpatrick

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

5535 A N. W. 35th Av.

83

Building 15

84 City

Ft. Lauderdale

FL

85 Zip Code

33309

10. Name and Address of New Registered Agent

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 JoAnn Kirkpatrick, Director

9-16-97

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 President ☐ DELETE

NAME Jacquelyn Tarver

STREET ADDRESS 5535 A N. W. 35th Av.

CITY-ST-ZIP Ft. Lauderdale, FL 33309

TITLE Vice-President ☐ DELETE

NAME Robert J. Herzog

STREET ADDRESS 5535 A N. W. 35th Av.

CITY-ST-ZIP Ft. Lauderdale, FL 33309

TITLE Director ☐ DELETE

NAME George Kirkpatrick

STREET ADDRESS 5535 A N. W. 35th Av.

CITY-ST-ZIP Ft. Lauderdale, FL 33309

TITLE Director ☐ DELETE

NAME JoAnn Kirkpatrick

STREET ADDRESS 5535 A N. W. 35th Av.

CITY-ST-ZIP Ft. Lauderdale, FL 33309

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 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 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] SIGNATURE REQUIRED: [Signature] 954-784-8447

CR2E034 (4/97)