## 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 DOCUMENT # P96000071890 (3)

## **FILED** May 08 1997 8:00am Secretary of State

OHM ASSEMBLY, INC.  Principal Place of Business Mailing Address  306 N.E. 1ST STREET 306 N.E. 1ST STREET DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441-3525					
			3. Date Incorporated or Qualified 08/26/1996	3a, Date of Last F	Report
2. Principal Place of Business	2a. Mailing Address	15	4 FEI Number		pplied For
21 5800 NE. 151 TERR.	26 5800 NE	1 <sup>ST</sup> TERIR	65-0710753	——————————————————————————————————————	ot Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional equired
City & State 23 FT. LAUDERDALE FI	City & State 28 M. LAUDERO	ace Fl	Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip Country 24 33334 25 BROWARD	29 83334	30 BROWARD	8. This corporation has liability for in Florida Statutes	ntangible tax under s Yes <b>M</b> No	s. 199.032,
g. Name and Address of Current	t Registered Agent		10. Name and Address of New Reg	sistered Agent	
HACHT, KATHIE		81 Name			
306 N.E. 1ST STREET		62 Street Addr	ress (P.O. Box Number is Not Acceptable	le)	
DEERFIELD BEACH FL 33441			· · · · · · · · · · · · · · · · · · ·		
		83			
	•	84 City		- 85 Zip	Code
<ol> <li>Pursuant to the provisions of Sections 607,0502 office or registered agent, or both, in the State</li> </ol>	2 and 607.1508, Florida Stati of Florida, Such change was	utes, the above-named corp is authorized by the corporat	poration submits this statement for the pi tion's board of directors. I hereby accep-	urpose of changing i t the appointment as	ris registered s registered
agent. I am familiar with, and accept the obliga	ations of, Section 607.0505, F	Florida Statutes	, , , , , , , , , , , , , , , , , , , ,		İ
agent. I am familiar with, and accept the obligated SIGNATURE.	ations of, Section 607.0505, F	Florida Statutes.		· · · · · · · · · · · · · · · · · · ·	
agent I am familiar with, and accept the obligated SIGNATURE  Standard, typed or printed name of registered agents.	ations of, Section 607.0505, F	Florida Statutes.  OTE: Registered Agent signature require	rad when reinstating)	DATE EDC AND DIDECTO	
agent. I am familiar with, and accept the obligated SIGNATURE.  Signature, typed or printed name of registered egenus.  OFFICERS AND	ations of, Section 607.0505, F int and title if applicable (NC D DIRECTORS	Florida Statutas.  TE: Registered Agent signature required.		ERS AND DIRECTO	
agent. I am familiar with, and accept the obligated SIGNATURE.  Signature, typed or printed name of registered egenus.  OFFICERS AND	ations of, Section 607.0505, F int and title if applicable (NC D DIRECTORS	Tiorida Statutes  TE: Registered Agent signature reguli	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA		RŞ IN 12
agent I am familiar with, and accept the obligated SIGNATURE  Signature, typed or printed name of registered ager  12. OFFICERS AND  THE KATHIE HACHT NAME	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	Florida Statutas.  TE: Registered Agent signature required.	rad when reinstating)	ERS AND DIRECTO	RŞ IN 12
agent. I am familiar with, and accept the obligated SIGNATURE.  Signature, typed or printed name of registered eger.  12. OFFICERS AND THE HACKT PAGES OF THE PAG	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	TE: Registered Apent algorature requited to the second statutes and the second statutes are second s	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO	
agent. I am familiar with, and accept the obligated SIGNATURE  Signature, typed or printed name of registered agent 12. OFFICERS AND	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	Tiorida Statutes  TE: Registered Apent algorature requit  13.  1.1 TITLE  1.2 NAME	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO	RŞ IN 12
agent I am familiar with, and accept the obligated SIGNATURE  Signature, typed or printed name of registered ager  12. OFFICERS AND  THE KATHIE HACHT NAME	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	TE: Registered Apent algorature requit  13.  1.1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY - ST-ZIP	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTOR	RS IN 12 SAddition
agent I am familiar with, and accept the obligated SIGNATURE  Signature, typed or printed name of registered agental.  12. OFFICERS AND  THE PRESIDENT  STREET ADDRESS  CITY-ST-ZIP  TILE  THE	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	TE: Registered Apent algorature requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTOR	RS IN 12 SAddition
agent. I am familiar with, and accept the obligations of the state of the obligations of	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	TE: Registered Apent algorithme requited in the second statutes.  1.1 Tiffle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 Tiffle 2.2 NAME	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTOR	RS IN 12 SAddition
agent I am familiar with, and accept the obligated signature. Signature, typed or printed name of registered eger  12. OFFICERS AND  THE HAUNT PRESIDENT  STREET ADDRESS 5800 NE 157 TO  THE NAME  STREET ADDRESS FT, LAUDERDALE,  THE NAME  STREET ADDRESS	ations of, Section 607.0505, F  Int and tille if applicable (NC D DIRECTORS DELETE	TE: Registered Apent algorithme requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTOR	RS IN 12 SAddition
agent. I am familiar with, and accept the obligations. SIGNATURE:  Signature, typed or printed name of registered agent.  12. OFFICERS AND.  ITHE KATHIE HACHT PRESIDENT.  STREELADDRESS 5800 NE 157 78  TITLE NAME STREELADDRESS CITY-SI-7IP  TITLE NAME STREELADDRESS CITY-SI-7IP	ations of, Section 607.0505, Fint and tille if applicable (NCD DIRECTORS)  DELETE  ERR.  F4. 33334  DELETE	TE: Registered Apent algorithme requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO	Addition  Addition
agent I am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obli	ations of, Section 607.0505, Fint and tille if applicable (NCD DIRECTORS)  DELETE  ERR.  F4. 33334  DELETE	TE: Registered Apent algoriture requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO	Addition  Addition
agent. I am familiar with, and accept the obligations agent. I am familiar with, and accept the obligations agent. I am familiar with, and accept the obligations agent. I am familiar with, and accept the obligations.  12. OFFICERS AND  THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME NAME	ations of, Section 607.0505, Fint and tille if applicable (NCD DIRECTORS)  DELETE  ERR.  F4. 33334  DELETE	TE: Registered Apent algorithme requited to the state of	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO	Addition  Addition
agent I am familiar with, and accept the obligations. SIGNATURE  Signature, typed or printed name of registered agents.  12. OFFICERS AND  THE NAME STREET ADDRESS CITY-ST-ZIP FILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ations of, Section 607.0505, Fint and tille if applicable (NCD DIRECTORS)  DELETE  ERR.  F4. 33334  DELETE	TE: Registered Apent algorithme requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY - ST - ZIP  4.1 TITLE	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO	Addition  Addition
agent. I am familiar with, and accept the obligations signature. Signature, typed or printed name of registered agent.  12. OFFICERS AND THE HACKT PRESIDENT TO STREET ADDRESS SOONE 15T TO STREET ADDRESS CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP	ations of, Section 607.0505, Fort and tile if applicable (NC DIRECTORS)  DELETE  FL. 3334  DELETE	TIS.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  4.4 CITY-ST-ZIP  3.1 TITLE  3.1 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO Change Change Change	Addition
agent I am familiar with, and accept the obligation of the state of th	ations of, Section 607.0505, Fort and tile if applicable (NC DIRECTORS)  DELETE  FL. 3334  DELETE	TE: Registered Apent algorithme requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY - ST - ZIP  4.1 TITLE	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO Change Change Change	Addition
agent I am familiar with, and accept the obligations by the superior of the policy and accept the obligations. Signature, typed or printed name of registered agent 12.  OFFICERS AND THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE	TE: Registered Apent eignature requit  13.  1.1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent I am familiar with, and accept the obligations and accept the obligations. Signature, typed or printed name of registered agent and accept the obligations, typed or printed name of registered agent at the same accept the obligations. Signature, typed or printed name of registered agent accept the part of the same accept the obligations. Signature, typed or printed name of registered agent and accept the obligations. Signature, typed or printed name of registered agent accept the part of	ations of, Section 607.0505, Fort and tile if applicable (NC DIRECTORS)  DELETE  FL. 3334  DELETE	TE: Registered Apent algorature requit  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS	red when reinstating)  ADDITIONS/CHANGES TO OFFICE  SECRETARY / TREA	ERS AND DIRECTO Change Change Change	Addition
agent. I am familiar with, and accept the obligations. SIGNATURE  Signature, typed or printed name of registered agent.  12. OFFICERS AND  THLE NAME STREET ADDRESS CITY-SI-ZIP THERE NAME STREET ADDRESS CITY-SI-ZIP THERE NAME STREET ADDRESS CITY-SI-ZIP	ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE	TIS.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME	ADDITIONS/CHANGES TO OFFICE SECRETARY TREA STATEMENT TO THE SECRETARY TO T	ERS AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent. I am familiar with, and accept the obligations. Signature:  Signature: Signature, typed or printed name of registered agent.  12. OFFICERS AND.  THE NAME STREET ADDRESS CITY-SI-ZIP THE	ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE	TE: Registered Apent algorature requit  13.  1.1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE	ADDITIONS/CHANGES TO OFFICE SECRETARY TREA STATEMENT TO THE SECRETARY TO T	ERS AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent. I am familiar with, and accept the obligations. Signature:  12. OFFICERS AND  11. OFFICERS AND  11. FILE  NAME STREEL ADDRESS CITY-SI-ZIP TITLE  NAME STREET ADDRESS CITY-SI-ZIP	Ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE  DELETE	TE: Registered Apent algorature requit  13.  1.1 Title  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICE SECRETARY TREA STATEMENT TO THE SECRETARY TO T	ERS AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition
agent. I am familiar with, and accept the obligations. Signature:  12. OFFICERS AND  11. OFFICERS AND  11. VATHE HACKT  PRESIDENT  ITHE  NAME  STREEL ADDRESS  CITY-SI-7IP  TITLE	ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE	TE: Registered Apent algorithme requit  13.  1.1 Title  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICE SECRETARY TREA STATEMENT TO THE SECRETARY TO T	ERS AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent I am familiar with, and accept the obligations. SIGNATURE  12. OFFICERS AND  11. CATHUE HACKT  NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE  DELETE	TE: Registered Apent algorithme requit  13.  1.1 Title  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  33 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.6 CITY-ST-ZIP  6.1 TITLE  6.2 NAME	ADDITIONS/CHANGES TO OFFICE SECRETARY TREA STATEMENT TO THE SECRETARY TO T	ERS AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition
Agent I am familiar with, and accept the obligations. Signature, typed or printed name of registered agent I am familiar with, and accept the obligations. Signature, typed or printed name of registered agent I am familiar with, and accept the obligations. Signature, typed or printed name of registered agent I am familiar with, and accept the obligations. Signature, typed or printed hadress 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 TITLE TITLE THE TADRESS CITY-ST-ZIP TITLE TITLE THE TADRESS CITY-ST-ZIP TITLE THE TADRESS CITY-ST-ZIP TITLE THE TADRESS CITY-ST-ZIP TITLE	Ations of, Section 607.0505, Fort and tile if applicable (NC D DIRECTORS)  DELETE  DELETE  DELETE  DELETE	TE: Registered Apent algorithme requit  13.  1.1 Title  12 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  22 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICE SECRETARY TREA STATEMENT TO THE SECRETARY TO T	ERS AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition

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.

0322210