SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name P96000094999 (5)

H & S GROUP OF COMPANIES, INC.

FILED Aug 26 1998 8:00am Secretary of State



Principal Place of Business Malling Address											A(I) BIAII) 1914 0 19148 1911 1991	
7261 N.W. 12 STREET 7261 N.W. 12 STRE													
MIAMI FL 33126				MIAMI FL 33126					DO NOT WRITE IN THIS \$P ACE				
										E IN THIS	SPACE	<u></u>	
								'	3. Date Incorporated or Qualified 11/18/1996				
2. Principal P	lace of Business	2a. M	2a. Mailing Address				- 1	4. FEI Number			Applied For	7	
21		26	26					59-1525717			Not Applicable	,	
Suite, Apt.	#, etc.	S	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.	75 Additional		
22		27	4					S. Certificate of Status Desired		F	e Required		
City & Stat	e	c	City & State] •	6. Election Campaign Financing	L7	\$5	.00 May Be		
23			28						Trust Fund Contribution		Ad	ded to Fees	_
Zip	ļ ₁	Country		├ ¬ '					This corporation owes or has per			C71 -	
24	25		29	<u> </u>					Personal Property Tax due Jun-	· · · · · · · · · · · · · · · · · · ·			
		Address of Curre	nt Register	ed Agent		81	NI	1	0. Name and Address of New R	egistered	Agent		
	iarajah, sivai					81	Name						
	I N.W. 12 STRE					Street A	Address (P.O. Box Number is Not Acceptable)						
MAN	VII FL 33126											-	
						84	City			-	85	Zip Code	
							·			FL			_
l office or	registered agent.	or both, in the Stat	e of Florida.	1508, Florida Statute Such change was a ection 607.0505, Fl	authorized	by.	the corpo	orporatio oration's	n submits this statement for the pur board of directors. I hereby accept	rpose of ch the appoi	anging ntment	its registered as registered	
SIGNATURE		•	-										
Signalum, typed or printed name of registered agent and title if applicable. (NOTE:							ent algnature	re required v	Ired when reinsteting) DATE				
12.	- 	OFFICERS A	ND DIRECT				13.		ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRE		{
TITLE	S	X		L DELETE	1.1 111			S			Cha	inge Addition	١ ١
NAME	SINNARAJAH,				1.2 NA			SIN	inarajah, harijah	Ī			
STREET ADDRESS	7261 N.W. 12				1.3 ST	REET	ADDRESS	726	1 N.W. 12 STREE MI,FL 33126	eT			
CITY-ST-ZIP	MIAMI FL 331	26			1.4 CI		ZIP	MIA	MI,FL 33126				6
TITLE				DELETE	2.1 TIT						Cha	inge L. Addition	۱ <u> </u>
NAME					2.2 NA								
STREET ADDRESS					2.3 ST	REET	ADDRESS						
CITY-ST-ZIP	<u></u> '				2.4 CI		ZIP				_		
TITLE				L DELETE	3.1 TIT				•		Cha	inge Addition	۱
NAME	İ				3.2 NA				•				
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP					3.4 CI		ZIP				_	F***	-4
TITLE				L DELETE	4.1 TI						Cha	inge Addition	۱
NAME					4.2 NA								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP					4.4 CI		ZIP		·		_		
TITLE				DELETE	5.1 111						Cha	inge Addition	٠
NAME					5.2 NA	ME.							
STREET ADDRESS					5.3 ST	REET	ADDRESS						
CITY-ST-ZIP					5.4 CI		ZIP	 					
TITLE				DELETE	6.1 TIT	LE					Cha	inge L. Addition	<u>ا</u> ا
NAME					6.2 NA	ME							
STREET ADDRESS					6.3 ST	REET	ADDRE\$S						
CITY-ST-ZIP					6.4 CI	TY-ST-	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 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.