FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 20 1998 8:00am Secretary of State

1. Corporation	H ENTERPRISES, INC.	0022707 (6)				
Principal Place of Business		Mailing Address	Mailing Address			119 11911 1981 9811 1881 1881
4977 NW 72 TERRACE		4977 NW 72 TERRACE				
LAUDERHILL FL \$3319		LAUDERHILL FL 33319		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					03/12/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26	26		65-0750280	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			C. Commodito of Glados Dosmod	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
Zip Country		28]	Zip Country		Trust Fund Contribution	Added to Fees
24	25] 29		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
<u> </u>	9. Name and Address of Currer				10. Name and Address of New Registered Agent	
JFI	WETT, CHARLES E	· · · · · · · · · · · · · · · · · · ·	81	Name		*
	5 HOLLYWOOD BLVD.		82	Ctract Addre	ess (P.O. Box Number is Not Acceptable)	
#2			02	Street Addre	ess (P.O. Box Number is Not Acceptable)	
HO	LLYWOOD FL 33020		83			
			84	City		85 Zip Code
				Oity	FL	_ 103 210 Code
11. Pursuant to office or reagent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Flor ida Statu of Florida. Such <mark>change was</mark> ations of, Section 607.0505, F	tes, the above- authorized by lorida Statutes.	named corporation	oration submits this statement for the purpose on on's board of directors. I hereby accept the app	of changing its registered pointment as registered
SIGNATURE	Signature, typed or presed name of segment age		. 6			
12.		D DIRECTORS	FE: Registered Agen	: signa:ure require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DELETE		1.1 TITLE	· · · · ·	ASSETTION TO STATE OF THE PARTY	Change Addition
NAME	HENDRICKSON, DORIS		1.2 NAME			
STREET ADDRESS 4977 NW 72 TERRACE			1.3 STREET ADDRESS			
CITY-ST-ZIP	LAUDERHILL FL 33319		1.4 City-St-ZiP			
TITLE		☐ DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREET A	DDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY-ST-ZIP			
TITLE			3 1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET A	ADDRESS .		
CITY-ST-ZIP			3.4. C/TY-ST	- ZIP		
TITLE			4.1 TITLE			L Change L Addition
NAME CORPET ADDRESS			4. 2 NAME			
STREET ADDRESS			4.3 STREET A			
CITY-ST-ZIP		DELETE	4.4 CITY - ST	- 214		Change Addition
TITLE			5.1 TITLE			E'' Autride E' Vourioit
NAME Street Address			5.2 NAME			
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
TITLE			6.1 TITLE	- 211		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET A	DDRESS		ļ
CITY-SI-ZIP			6.4 CITY - ST			
	ertify that the information supplied w	ith this bling does not qualify t			Section 119 07/3)(i) Florida Statutes, Lifurther of	ertify that the information

Indicated on this annual report or supplied with this him globes not quanty for the exemption stated in Section 119.07(3)(f), Florida Statutes. 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 of 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 change(I, or of an attachment with an address.