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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1998 8:00am/

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000084826 (1)

	HITCH, INC.	Mailing Add	dress				
296 N.E. 23RD ST. 298 N.E. 23RD ST. BOCA RATON FL BOCA RATON FL						UD ODAOC	
						DO NOT WRITE IN THe state of Qualified	HS SPACE
						10/01/1997	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied Fo
1 26 Suite Apr # atc			ato Apl H ato			65-0784798	Not Applic
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & S	tate			6. Election Campaign Financing	\$5.00 May Be
3		28		,		Trust Fund Contribution	Added to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the	
4	25 9. Name and Address of Curr	29 rent Registered Ag	ent	30]		Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
нп	TCH, F S			81	Name	Iogiotol	<u></u>
	8 N.E. 23RD ST.			82	Street Add	cress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL					0,, 00, 7,00	Total National (1.0. Box National is Not Acceptable)	
				83			
				84	City	-	85 Zip Code
Z.	Signifure, typed or printed make of registered OF FICERS A	AND DIRECTORS	DELETE	13.	ant signatura requ	ulted when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	
NAME .	HITCH, FS	_		1.2 NAME	ļ		C Sharige C Fra
STREET ADDRESS	298 N.E. 23RD ST.			1.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-S	T-ZIP		
ITLE		į.] DELETE	2.1 TITLE			∐ Change ∐ Ad
Hame Street address				2.2 NAME 2.3 STREET	ANDRESS		
CITY-ST-ZIP				2.4 CHY-S			
TIFLE			DELETE	3.1 THTLE			Change Ad
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET			
CITY-ST-ZIP			DELETE	3.4 CITY+S 4.1 TITLE	ST-ZIP		Change Ad
LAME		L		4. 2 NAME	ļ		
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - S	T-ZIP		
ITLE		L	DELETE	5.1 TITLE			Change Ad
NAME				5.2 NAME	ADDUCCO		
STREET ADDRESS				5,3 STREET	ì		
CITY-ST-ZIP FITLE			DELETE	5.4 CITY-S 6.1 TITLE	11-20"		Change Ad
NAME				6.2 NAME			-
STREET ADDRESS)			6.3 STREET	ADDRESS		

64 CITY-ST-ZIP

14. Thereby 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 coquired 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.