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).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P97000095237 (8)

FILED Jul 10 1998 8:00am Secretary of State

HYGAR,	INC.	• •	•		
, ,,,				•	I (BEGINA) BIT INTIL ETER BEIK ANNI NAME TAME INTO ANIO (1808 MIN 1801 1801
				•	
Principal Place of Business Mailing Address				* 1001/1004 140 1004 1004 1004 1004 1004	
1321 S. POWERLINE ROAD 1321 S. POWERLINE ROAD					
POMPANO BEACH FL 33069 POMPANO BEACH FL 33069					
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal Place of Business 2e. Mailing Address					11/06/1997 4. FEI Number Applied For
21 26					4. FEI Number Applied For Not Applied For Not Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional
22 27			Suite # 104		5. Certificate of Status Desired Fee Required
City & State City & State				6. Election Campaign Financing \$5.00 May Be	
23	3				Trust Fund Contribution Added to Fees
Zip Country Zip Coun			Country		8. This corporation owes or has paid the current year Intangible
24	25	29 30	0		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	l Registered Agent		r	10. Name and Address of New Registered Agent
GAR	SON_ JEFFREY		81	Name	
6614 TIBÙRON CIRCLE BOCA RATON FL 33433			82	Street Add	dress (P.O. Box Number is Not Acceptable)
			<u> </u>		
			83		
			84	City	■■ 85 Zip Code
					FL ` `
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 obliga	itions of, section 607.0505, Florid	la Statutes	3.	appendix an appendix and appendix appendix and appendix and appendix appendix appendix and appendix append
SIGNATURE					
12,	Signature, typed or printed name of registered agent OFFICERS ANI		13.	geni signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	GARSON, JEFFREY	L. Joece I.	1.2 NAME	ľ	C Ondrigo
STREET ADDRESS			1.3 STREET	ADDRESS	
CITY-ST-ZIP	MAAL BIRALES ALLAS		1.4 CITY-ST	-ZIP	
TITLE		DELETE	2.1 TITLE		Change Addition
NAME	_		2.2 NAME		
STREET ADDRESS	2.3 STF		2.3 STREET	ADDRESS	
CITY-ST-ZIP	P 24Ci		2.4 CITY-ST	-ZIP	
TITLE	DELETE 3.1 TO		3.1 TITL€		Change Addition
NAME	3.2 NA		3.2 NAME		·
STREET ADDRESS	ET ADDRESS 3.3 STI		3.3 STREET	ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST	-ZIP	
TITLE	DELETE 4.1 TIT		4.1 TITLE		Change Addition
NAME	. 4.2 NA		4.2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST	-ZIP	
TITLE		DELETE 5.1 TI			Change Addition
NAME			5.2 NAME		400002586 894 -07/13/9801096001
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		5.3 STREET	1	~U[/15/36~~U[U36~~UU]
CITY-ST-ZIP		5.40		-ZiP	***150.00 V
TITLE	DELECT.		6.1 TITLE		Change L Addition
NAME			6.2 NAME	10000000	<i>'''</i>
			6.3 STREET		
CITY-ST-ZIP			6.4 CITY-ST	-ZIP	

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 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 in attachment with an address.

SIGNATURE:

Attachment with an address.

ordent6/30/98 954-972-896

(98/6) \$5032