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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # S21380

H & N SERVICES, INC.

(8)

Principal Place of Business

Mailing Address

FILED May 06 1997 8:00am Secretary of State



FORT-LAUDERDALE-FL-88926		4546 SPRINGSIDE DRIVE- FORT LAUDERDALE FL 93920-2744				
US		116-		3. Date Incorporated or Qualified 12/28/1990	3a. Date of Last Rep 05/01/1996	oort
2. Principal Place of Busine		2a. Mailing Address		4. FEI Number	Appl	lied For
21 1320 WHITE	55TONE WAY	26 \$ 1320 W	Hitestone WAY	/ 65-0237078	Not a	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 DAVIE, FL.		28 WAVIE, FL.		Trust Fund Contribution	Added to Fees	
Zip Country		Zip Country		8. This corporation has liability for intangible tax under s. 199.032,		
	$_{5}$ USA	[29] 3333 35	30 USA		Yes No	
	and Address of Current	Registered Agent	10. Name and Address of New Registered Agent			
NUCCITELLI, JU			81 Name	ludith A Nuccitelli		
1546 OPRINGSI			82 Street Add	ress (P.O. Box Number is Not Acceptab	(c) 44/2. A	<i>-</i>
FT LAUDERDAL	E FL 33326		130	lress (P.O. Box Number is Not Acceptab 20 WHITES TONE	WHY	
			83		,	
			84 City		85 Zip_Co	2de
			\square	Vie	FL]" [333	325
				poration submits this statement for the p		
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 obligations of, Section 607.0505. Florida Statutes.						
SIGNATURE Signature, typed of	Companies of registered agent	MCCCCCO (NO	Judit. TE Registered Agent signature requ	HH. NUCC TCII i ired when reinstaling)	DA1 _E	· to consider the state of
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE D		☐ DÉLETE	1.1 TITLE		Change	Addition 3
NAME NUCCITEL	LI, . JUDITH A	1. 1. 1 1 to a strang 11/1	1.2 NAME			
STREET ADDRESS 1346 SPR	INGSIDE DR 7320	whitestone Wh	1.3 STREET ADDRESS			{
CITY-ST-ZIP FT LADUE	RDALE FL DAVIE	, F1. 33325	1.4 City-St-ZiP			
TITLE VICE-	ppes	☐ DELETE	2 1 TITLE		Change	Addition C
NAME HOWARD M. HOBBS STREET ADDRESS 1320 WHITESTOME WAY		2.2 NAME				
STREET ADDRESS 1320 WHITESTOME W		OHY	2.8 STREET ADDRESS			
	FL. 33525		2.4 Chy-S1-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE		TT DETELE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-\$1-ZIF			
TITLE		DELETE	4.1 11TLE		∟_ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.8 STREET ADDRESS			
CITY-ST-ZIP		December	4.4 CITY-S1-7IP			1 1 1 1 1 1 1
TITLE		L DELFTE	5.V TITLE		Change	Addition
NAME ·			5.2 NAME			
STREET ADDRESS			5.8 STREET ADDRESS			
CITY-ST-ZIP		Control Control	5.4 CITY - S1 - ZIP			
TITLE		☐ DELETE	6.4 TAILE		Change	Addition
NAME			G.2 NAME			Ì
STREET ADDRESS			6.8 STREET ADDRESS]
CITY-ST-ZIP		- N. d. 1. CP	6.4 CITY - ST - ZIP		1000	
16. LOO Dereby certify that	the information supplied :	wiin inie filina does not dual	lity for the exemption claid	id in Section 119.07(3)(i). Florida Statutes	 I further certify that the 	ın I

information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effoct 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 13 if changed, or on an attachment with an address.

954-424-1730