

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

REPUBLICAN
APRIL 1, 1995



DEPARTMENT OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32399

FILED
SECRETARY OF STATE
DEPARTMENT OF CORPORATIONS

95 MAY - 1 AM 8:31

DOCUMENT # S59649

(1)

HEIDI & JOE INC

DO NOT WRITE IN THIS SPACE

1. Name of Corporation		2a. Mailing Address		3. Date of Operation of Calendar	3b. Date of Last Report
11449 S.W. 40TH ST MIAMI FL 33165		11449 S.W. 40TH ST. MIAMI FL 33165		06/10/1991	06/14/1994
2. Filing Officer's Title	2a. Mailing Address	4. Filing Officer	5. Certificate of Status Desired		
21	26	65-0267426	Not Applicable		
22	27	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing Trust Fund Contributor		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under 1990 GS Chapter 204.01.	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
MELCHIONA, JOSEPH 11449 S.W. 40TH ST. MIAMI FL 33165		81. Name			
		82. Street Address (P.O. Box Number is Not Acceptable)			
		83.			
		84. City	FL	85. Zip Code	

11. I, the undersigned, being duly sworn, depose and say that I am the duly authorized representative of the corporation named herein and that I am duly qualified to execute this statement for the purpose of filing of a registered office or registered agent of the State of Florida. I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

Joseph Melchiona 4/8/95

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																																																																												
<table border="1"> <tr> <td>NAME</td> <td>D MELCHIONA, JOSEPH</td> <td>14. NAME</td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>STREET ADDRESS</td> <td>11449 S.W. 40TH ST.</td> <td>15. STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CITY</td> <td>MIAMI FL</td> <td>16. CITY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>STATE</td> <td></td> <td>17. STATE</td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>ZIP</td> <td></td> <td>18. ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>1984-1990</td> <td></td> <td>19. 1984-1990</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20. NAME</td> <td></td> <td>21. NAME</td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>22. STREET ADDRESS</td> <td></td> <td>23. STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>24. CITY</td> <td></td> <td>25. CITY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>26. STATE</td> <td></td> <td>27. STATE</td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>28. ZIP</td> <td></td> <td>29. ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>30. 1984-1990</td> <td></td> <td>31. 1984-1990</td> <td></td> <td></td> <td></td> </tr> <tr> <td>32. NAME</td> <td></td> <td>33. NAME</td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>34. STREET ADDRESS</td> <td></td> <td>35. STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>36. CITY</td> <td></td> <td>37. CITY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>38. STATE</td> <td></td> <td>39. STATE</td> <td></td> <td>Change</td> <td>Add</td> </tr> <tr> <td>40. ZIP</td> <td></td> <td>41. ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>42. 1984-1990</td> <td></td> <td>43. 1984-1990</td> <td></td> <td></td> <td></td> </tr> </table>	NAME	D MELCHIONA, JOSEPH	14. NAME		Change	Add	STREET ADDRESS	11449 S.W. 40TH ST.	15. STREET ADDRESS				CITY	MIAMI FL	16. CITY				STATE		17. STATE		Change	Add	ZIP		18. ZIP				1984-1990		19. 1984-1990				20. NAME		21. NAME		Change	Add	22. STREET ADDRESS		23. STREET ADDRESS				24. CITY		25. CITY				26. STATE		27. STATE		Change	Add	28. ZIP		29. ZIP				30. 1984-1990		31. 1984-1990				32. NAME		33. NAME		Change	Add	34. STREET ADDRESS		35. STREET ADDRESS				36. CITY		37. CITY				38. STATE		39. STATE		Change	Add	40. ZIP		41. ZIP				42. 1984-1990		43. 1984-1990				<p>REMITTED BY MAY 1</p>
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the reporting exemption under 1990 GS Chapter 204.01. I further certify that the information provided in this annual report for supplemental information is true and accurate and that the corporation shall have the same responsibility for its accuracy as that required by 1990 GS Chapter 204.01. I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

SIGNATURE: *Joseph Melchiona* 4/8/95 (305) 550-5774 353-8665

15. I, the undersigned, being duly sworn, depose and say that I am the duly authorized representative of the corporation named herein and that I am duly qualified to execute this statement for the purpose of filing of a registered office or registered agent of the State of Florida. I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.