FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 11 PM 8:01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **V13096** **(5)**

1. Corporate Name

H & S INSPECTION SERVICES, INC.

Principal Place of Business: 12326 SW 132ND CT, MIAMI FL 33186

Mailing Address: 12326 SW 132ND CT, MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/11/1992**

3a. Date of Last Report: **05/01/1994**

4. FEI Number: **65-0322311** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

8. For corporation (ineligible) for intangible tax under S. 199.___ Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HELMKE, GEORGE J.
12326 SW 132ND CT
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DVT
NAME	HELMKE, GEORGE J.
STREET ADDRESS	12326 SW 132 CT
CITY-ST-ZIP	MIAMI FL
TITLE	DVS
NAME	SMITH, JOSEPH L.
STREET ADDRESS	12326 SW 132 CT
CITY-ST-ZIP	MIAMI FL
TITLE	P
NAME	HELMKE, SUSAN J.
STREET ADDRESS	12376 SW 132 CT
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (each entry: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; ☐ Change ☐ Addition)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 an attachment with an address.

SIGNATURE: George Helmke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/95 Date 305 251 9275 Daytime Phone #

0203716 CP