

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

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**Apr 01 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # F56835 (4)**

1. Corporation Name  
**HMG INVESTMENT CORP.**



Principal Place of Business  
**2701 S BAYSHORE DR #PH  
COCONUT GROVE FL 33133**

Mailing Address  
**2701 S BAYSHORE DR #PH  
COCONUT GROVE FL 33133-5309**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>12/01/1981</b>	3a. Date of Last Report <b>05/01/1996</b>
21	22	23	24	25	26
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>59-2269345</b>	Applied For Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
Country		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>BROWN, MORTON P 1428 BRICKELL AVE. C/O SHEA &amp; GOULD MIAMI FL 33131</b>				81	Name <b>LAWRENCE ROTHSTEIN</b>		
				82	Street Address (P.O. Box Number is Not Acceptable) <b>2701 SOUTH BAYSHORE DRIVE, PENTHOUSE</b>		
				83			
				84	City <b>COCONUT GROVE</b>	85	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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **Lawrence Rothstein** DATE: **3/12/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSC <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CAMAROTTI, CARLOS</b>	1.2 NAME	
STREET ADDRESS	<b>2701 SOUTH BAYSHORE DRIVE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>COCONUT GROVE FL</b>	1.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CRANK, KEITH W</b>	2.2 NAME	
STREET ADDRESS	<b>2701 SOUTH BAYSHORE DR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>COCONUT GROVE, FL 00000</b>	2.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WIENER, MAURICE</b>	3.2 NAME	
STREET ADDRESS	<b>2701 SOUTH BAYSHORE DR</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>COCONUT GROVE, FL 00000</b>	3.4 CITY-ST-ZIP	
TITLE	DVP <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GRAY, LEE</b>	4.2 NAME	
STREET ADDRESS	<b>30 CHURCH ST.</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NEW ROCHELLE NY</b>	4.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROTHSTEIN, LAWRENCE I</b>	5.2 NAME	
STREET ADDRESS	<b>2701 SO BAYSHORE DR</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>COCONUT GROVE FL</b>	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 an attachment with an address.

SIGNATURE: *[Signature]* **Lawrence Rothstein** DATE: **305-854-6803**

CR2E034 (9/96)