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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000063034 (1)

HHSPPX, INC.

Principal Place	e of Business	Mailing Address			1 1001/2003 310 /0100 (6/1/ 00/1/ 00/1/ 00/1	60110 01160 11111 90160 1	
1800 GLADES RD 1900 GLADES RD							
STE 260		STE 260					
BOCA RATON US	FL 33431	BOCA RATON FL 33431-7333 US	3		3. Date Incorporated or Qualified	3a. Date of Last	Report
00		00			09/09/1993	04/18/1996	,
2. Principal Pl	lace of Business	2a, Mailing Addgess		·	<b>4.</b> FEI Number		Applied For
21 33	SE 4th Street	26 33 SE 4	411 Stree	<i>†</i>	65-0445328	<del></del>	Vot Applicable
	#, etc.	Suite, Apt #, etc.	<b>sr</b> (		5. Certificate of Status Desired	60.76	Additional
يىرىك (22	tie 100	27 Just 10	<u>ර</u>		6. Certificate of Status Desired	Fee I	Required
City & State		City & State	1. 1	1	6. Election Campaign Financing		O May Be
23	A KATON, Fl.	28 COCA KA	ton, FI		Trust Fund Contribution		d to Fees
- 333H	32 Country Royal	33432	Country R	- 106	8. This corporation has liability for i	ptangible tax under ∐Yes □ No	s. 199.032,
24 0075	25 /A/M DE ACK		O TAIM DE	ACI)	Florida Statutes  10. Name and Address of New Re	· · · · · · · · · · · · · · · · · · ·	
HAI	<del></del>		81 Nam	е	10.		
HALVORSEN, JEFFREY T  1900 GLADES RD  82 Street Add							
STE 160				22 date:	ress (R.O. Box Mumber is Not Acceptable)		
BOCA RATON FL 33431							
	A INTONTE COTO		24 0	سلإ	tE 100		
			84 City	10 CH	2 RATONI'	FL 85 2	3432
11, Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above name	ed corpo	ration submits this statement for the p	urpose 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							
SIGNATORE	Signature, typed or printed name of registered agen		Registered Agent signal	ure required		DATE	
12.	OFFICERS AND		13.	т	ADDITIONS/CHANGES TO OFFIC		
TITLE	D	☐ DELETE	1.1 Title			L Change	Addition
NAME	HALVORSEN, JEFFREY T		1.2 NAME		3 SE Att) Street	Sto MA	
STREET ADDRESS	1900 GLADES RD, STE 260 BOCA RATON FL		1.3 STREET ADDRES	3 X	SE 414) Street, OCA RATON, F1.	22/20	
CITY-ST-ZIP TITLE	BUCA RATUN FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	$+ \mathcal{M}$	OCH KATON, IT.	☐ Change	Addition
NAME		tim beech	2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRES		•		j
CITY-ST-ZIP			2. 4 CITY - ST- ZIP				
TITLE		DELETE	3.1 TOLE			Change	Addition
NAME			3.2 NAME				i
STREET ADDRESS			3.3 STREET ADDRES	s			ı
CITY-ST-ZIP			3.4 CITY-S1-ZIP				j
TITLE		☐ DELETE	4.1 1(1LE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRES	S			· i
CITY-ST-ZIP			4.4 CITY - S1 - ZIP				
TITLE		☐ DELETE	5.1 1/1/18			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRES	S			
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP			Change	Addition
TITLE		L.J DELETE	6.1 THLE	1		L.J Change	, L_ AUDIDION
NAME ATRIET APPROVES			6.2 NAME	,			
STREET ADDRESS			6.3 STREET ADDRES				
14. I do hereb	by certify that the information supplied	with this filing does not quality	6.4 CITY-ST-ZIP for the exemption	 staled i	in Section 119.07(3)(i). Florida Statute	s. I further certify th.	at the
I <b>nfo</b> rmatio	in Indicated on this annual report or su	applemental annual report is true	e and accurate a	nd that n	my signature shall have the same lega	⊩effect as if made ι	inder 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.							

Hilliadson