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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

POCUMENT # P97000012792 (2)

HILLCREST COMMUNITIES CORPORATION II

Principal Place of Business Mailing Address 7661 S.W. 146TH STREET 7661 S.W. 146TH STREET MIAM! FL 33158 MIAMI FL 33158 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 02/07/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GONZALEZ, JULIO J 7661 S.W. 146TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33158** 83 84 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, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1 1 TITLE Change Gomez, Oscar F. NAME 1.2 NAME 12601 SW 143 LAME STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP Miami, Fl 33186 CITY-ST-ZW DELETE Addition 2.1 TITLE Change TITLE USTD Conzalez, Julio J. NAME 2.2 NAME 7661 Sew 146St STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP Miami F133158 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Addition DELETE Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE

14. Thereby 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 an authorized with an address.

5.2 NAME

6 1 TITLE

6 2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

(305) 849-880G

Change

**FILED** 

May 07 1998 8:00am

Secretary of State