


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

**FILED**  
**Apr 07 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000035939**  
 1. Corporation Name  
**Husky Rose, Inc.**

Principal Place of Business	Mailing Address
<b>1825 West Hillsboro Blvd.</b>	<b>1825 West Hillsboro Blvd.</b>
<b>Deerfield Beach, Fl 33441</b>	<b>Deerfield Beach, Fl 33441</b>

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified  
**April 18, 1997**

4. FEI Number  
**65-0754103**

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**Steven A. Schultz**  
**200 S. Biscayne Blvd., Suite 3150**  
**Miami, Florida 33131**

10. Name and Address of New Registered Agent

81 Name **DANIEL J. EREMIAN**

82 Street Address (P.O. Box Number is Not Acceptable)  
**5323 PALM PLAGE CIRCLE**

83

84 City **BOCA RATON** FL 85 Zip Code **33486**

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 *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input checked="" type="checkbox"/> DELETE	<b>Marilyn Zinns Bellus, Pres. &amp; Treas.</b>	<b>3205 Harrington Drive</b>	<b>Boca Raton, Fl. 33496</b>
<input checked="" type="checkbox"/> DELETE	<b>Brian Bellus, V.P. Sec.</b>	<b>3205 Harrington Drive</b>	<b>Boca Raton, Fl. 33496</b>
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>PRES, SEC, TREAS.</b>
1.3 STREET ADDRESS	<b>DANIEL J. EREMIAN</b>
1.4 CITY-ST-ZIP	<b>5323 PALM PLAGE CIRCLE</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Addition
6.2 NAME	<b>000002481230</b>
6.3 STREET ADDRESS	<b>-04/07/98--01064--015</b>
6.4 CITY-ST-ZIP	<b>***150.00</b>

14. I 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]* 3/30/98 954-570-8819

CR2E034 (10/97)