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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

ANIN	1998 DIVISION OF CORP		_	ONS	Secretary of State	
DOCUMENT # P9400057690 (7)						
HGBIN	IVESTMENTS, INC.					
Principal Plac	e of Business	Mailin	g Address	- 0		1 (00) (00) (00) (00) (00) (00) (00) (00
500 E KENNE	DY BLVD	500 E	KENNEDY BLVD			
SUITE 200 SUITE 200						DO NOT HOUTE IN M. A. F. I. S. F.
TAMPA FL 33	8 02	TAMP	A FL 33602			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
						•
2. Principal F	lace of Business	2a. Ma	illng Address		·	08/04/1994 4. FEI Number Applied For
21		26				65-0514208 Not Applicable
Suite, Apt.	#, etc.	Su	te, Apt. #, etc.			- \$8.75 Additional
22 City & Stat		27				5. Certificate of Status Desired Fee Required
23	e	28	y & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country		8. This corporation owes or has paid the current year Intangible
24	25	29	3	30		Personal Property Tax due June 30. Yes No
	9. Name and Address	s of Current Registere	d Agent			10. Name and Address of New Registered Agent
GOLDSTEIN, BRUCE S 81 Nam					Name	-
FOO E MENDIEDY BLUD					Street A	Address (P.O. Box Number is Not Acceptable)
SUITE 200						(i.e. best in the following in the foll
TAI	MPA FL 33602			83		
				84	City	■■ 85 Zip Code
					-	FI 1 '
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					•	
01011110112	Signature, typed or printed name of			Registered Age	nt signature i	required when reinstating) DATE
12.		ICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	_	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GOLDSTEIN, BRUCE			1.2 NAME		
STREET ADDRESS	500 E. KENNEDY BL	VD. SUITE 200		1.3 STREET	ADDRESS	
CITY-ST-ZIP	TAMPA FL		T Section	1.4 CITY-ST	- ZIP	
TITLE	DVT\$	^	DELETE	2.1 TITLE	- 1	☐ Change ☐ Addition
NAME CERTE ADDRESS	RYDBERG, MARSHA			2.2 NAME		
STREET ADORESS	500 E. KENNEDY BL TAMPA FL	.VD. SUITE 200		2.3 STREET		· -
CITY-ST-ZIP TITLE	IAMPA FL		DELETE .	2. 4 CITY - S 3.1 TITLE	T-ZIP	Change Addition
NAME			C DECERC .	3.2 NAME	-	LI Change LI Addition
STREET ADDRESS				3.3 STREET	NDDDECC	
CITY-ST-ZIP				3.4. CITY-S		
TITLE			☐ DELETE	4.1 TITLE	- 2.15	☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET A	ADDRESS	
CITY-ST-ZIP				4.4 CITY-ST		
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET A	DDRESS	
CITY_ST_7IP				F 4 01704 PT	70	

14. I hereby certify that the Information supplied with this filling 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

DELETE

Change

☐ Addition

FILED

Feb 02 1998 8:00am