

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000060570

**Entity Name:** HBFLUSA, CORP.

**Current Principal Place of Business:**

SPITALGASSE 6  
SAULHEIM, RLP 55291

**Current Mailing Address:**

SPITALGASSE 6  
SAULHEIM, 55291 DE

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

STEVEN A. CULBREATH, P.A.  
111 - 2ND AVE. NE.  
SUITE 900, PLAZA TOWER  
ST. PETERSBURG, FL 33701 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KOLLMUS-HEEGE, BIRGIT  
Address SPITALGASSE 6  
City-State-Zip: SAULHEIM RLP 55291

Title VPST  
Name KOLLMUS, HARDY R  
Address SPITALGASSE 6  
City-State-Zip: SAULHEIM RLP 55291

Title VP  
Name KOLLMUS-HEEGE, MAX  
Address SPITALGASSE 6  
City-State-Zip: SAULHEIM RLP 55291

Title VP  
Name KOLLMUS-HEEGE, CINJA M  
Address SPITALGASSE 6  
City-State-Zip: SAULHEIM RLP 55291

Title VP  
Name KOLLMUS-HEEGE, JIL D  
Address SPITALGASSE 6  
City-State-Zip: SAULHEIM RLP 55291

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: BIRGIT KOLLMUS-HEEGE**

**PRESIDENT**

**01/15/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date