

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 471796 (3)

1. Corporation Name
H.B.L. CORP.



Principal Place of Business

7573 GRANVILLE DR
TAMARAC FL 33321
US

Mailing Address

7573 GRANVILLE DR
TAMARAC FL 33321
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
03/13/1975

3a. Date of Last Report
05/01/1995

4. FID Number
59-1588775

Applied For
Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GOLUB, BETTY
7573 GRAWVILLE DRIVE
TAMARAC FL 33321

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 607.0502, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the same as the corporation's officer or director)

Signature of Registered Agent (if not the same as the corporation's officer or director)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
	GOLUB, FAITH	3550 ESTEYDONA DR	MIAMI FL	☐
	GOLUB, BETTY	7573 GRANVILLE DRIVE	TAMARAC FL	☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
	NIR FAITH	600 NE 36 STREET	MIAMI, FLA 33137	☐	☒	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 attached list with an address.

SIGNATURE:

Betty Golub PD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96

954-726-2198

CR2E034 (12/95)