

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F86665

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: HUBS REALTY CORPORATION

## Current Principal Place of Business:

% PRESTIGE TRAVEL AGENCY  
7783 N.W. 44 STREET  
FORT LAUDERDALE, FL 33351

## New Principal Place of Business:

13130 W SR 84  
DAVIE, FL 33325

## Current Mailing Address:

% PRESTIGE TRAVEL AGENCY  
7783 N.W. 44 STREET  
FORT LAUDERDALE, FL 33351

## New Mailing Address:

1130 W SR 84  
DAVIE, FL 33325

FEI Number: 59-2307568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVERSTEIN, HELENE  
7783 N.W. 44 STREET  
FORT LAUDERDALE, FL 33351 US

## Name and Address of New Registered Agent:

SILVERSTEIN, HELENE  
1130 W SR 84  
DAVIE, FL 33325 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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SILVERSTEIN, HELENE  
Address: 7783 NW 44TH ST  
City-St-Zip: SUNRISE, FL

Title: D ( ) Delete  
Name: SLAKMAN, BARBARA  
Address: 7783 NW 44 STREET  
City-St-Zip: SUNRISE, FL

Title: D ( ) Delete  
Name: COHEN, SHEILA  
Address: 7783 NW 44 STREET  
City-St-Zip: SUNRISE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SILVERSTEIN, HELENE  
Address: 13130 W SR 84  
City-St-Zip: DAVIE, FL 33325

Title: D (X) Change ( ) Addition  
Name: SLAKMAN, BARBARA  
Address: 13130 W SR 84  
City-St-Zip: DAVIE, FL 33325

Title: D (X) Change ( ) Addition  
Name: COHEN, SHEILA  
Address: 13130 W SR 84  
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHEILA COHEN

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date