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

.. PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Jun 16, 1999 8:00 am Secretary of State

06-16-1999 90014 013 \*\*\*550.00

## DOCUMENT # F9700005767

| HGG AC  | QUISITION MACK REALTY   | COMPANY                           |                           |   |   |   |                        |                         |
|---|---|-----------------------------------|---------------------------|---|---|---|------------------------|-------------------------|
| Principal Pla   | ce of Business  | Mailing Address                   |                           |   | {   | 101111 10011 00111 001111 <b>10</b> 011 0 | OMI OLIGI BIMI ILBIO L | LIIL I <b>er</b> i Ieri |
| 12 WEST MARKET ST 12 W. MARKET ST (ORK PA 17405 H-15036 YORK PA 17405 |   |                                   |                           |   |   | DO NOT WRITE IN                           | THIS SPACE             |                         |
|   |   |                                   |                           |   | 3. Date Incorpora   | ited or Qualifed                          | _ <del>_</del>         |                         |
| 2. Principal Place of Business 2a. Mailing Address                    |   |                                   |                           |   | 10/31/1997<br>4. FEI Number   |   | Ap                     | plied For               |
| 21 26   |   |                                   |                           |   | <del>25</del> -1112132  | 23.29592                                  |                        | t Applicable            |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.               |                           |   | 5. Certifcate of S  |   | \$8.75 A<br>Fee Re     |                         |
| City & State  |   | City & State                      |                           | 6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees |   |   |                        |                         |
| Zip Country 24 25   |   | Zip                               | <del>-</del>              |   | 8. This corporation owes the current year Intangible Personal Property Tax. |   |                        |                         |
|   | 9. Name and Address of Curre  | nt Registered Agent               | -                         |   | 10. Name and Ad   | dress of New Registe                      | red Agent              |                         |
| INITED CORPORATE CERUSCES INC   |   |                                   |                           | Name  |   |   |                        |                         |
| UNITED CORPORATE SERVICES, INC.<br>801 NE 167TH ST., STE. 300         |   |                                   | 82                        | Street Ad   | ldress (P.O. Box Numbe  | r is Not Acceptable)                      |                        |                         |
| NOH   | TH MIAMI BEACH FL 33162   |                                   | 83                        | •   |   |   |                        |                         |
|   |   |                                   | 84                        | City  |   |   | FL 85 Zip C            | Code                    |
| agent. I  | registered agent, or both, in the State<br>arm familiar with, and accept the oblig<br>Signature, typed or printed name of registered ag | ations of, Section 607.0505, Flor | ida Statutes.             |   | ation's board of directors  | DAT                                       |                        | gistered                |
| 12.   | OFFICERS AND DIRECTORS  |                                   |                           |   |   | ANGES TO OFFICERS                         |                        | RS IN 12                |
| TITLE   | CCEO  | ☐ DELETE                          |                           |   |   |   | Change                 | Addition                |
| NAME  | RIKLIS, MESHULAM  |                                   | 1.2 NAME                  |   |   |   |                        |                         |
| STREET ADDRESS  | 9560 WILSHIRE BLVD.   |                                   | 1.3 STREET                | ADDRESS   |   |   |                        |                         |
| CITY-ST-ZIP   |   |                                   | 1.4 CITY-\$T              | -ZIP  |   |   |                        |                         |
| TITLE   | P   | ☐ DELETE                          | 2.1 TITLE                 |   |   |   | Change                 | ☐ Addition              |
| NAME  | WATKINS, TED  |                                   | 2.2 NAME                  |   | •   |   | -                      |                         |
|   | 12 WEST MARKET ST   |                                   | 2.3 STREET                | 1   |   |   |                        |                         |
| CITY-ST-ZIP<br>TITLE  | VT 17405  | ☐ DELETE                          | 2. 4 CITY-ST<br>3.1 TITLE | I-ZIP   |   | <del></del>                               | Change                 | Addition                |
| NAME  | WEINER, PAUL  |                                   | 3.2 NAME                  |   |   |   |                        | ٠,٠٠٠٠٠١١               |
| STREET ADDRESS  |   |                                   | 3.3 STREET                | ADDRESS   |   |   |                        | i                       |
| CITY-ST-ZIP   | YORK PA 17405   |                                   | 3.4. CITY-ST              |   |   |   |                        |                         |
| TITLE   | S   | ☐ DELETE                          | 4.1 TITLE                 |   |   |   | Change                 | Addition                |
| NAME  | MICHAELSON, ARTHUR M  |                                   | 4.2 NAME                  | 1   |   |   | / -                    |                         |
| STREET ADDRESS  | 633 THIRD AVE.  |                                   | 4.3 STREET                | ADDRESS   | 530 FIFTH   | AVENUE                                    |                        |                         |
| CITY-ST-ZIP   | NEW YORK NY 10017   |                                   | 4.4 CITY-ST               | -ZIP  | NEW YORK  | NY 1003                                   | 6                      |                         |
| TITLE   |   | ☐ DELETE                          | 5.1 TITLE                 |   |   |   | Change                 | Addition                |
| NAME  |   |                                   | 5.2 NAME                  |   |   |   |                        | :                       |
| STREET ADDRESS  |   |                                   | 5.3 STREET                | ADDRESS   |   |   |                        |                         |
| CITY-ST-ZIP   | <u> </u>  |                                   | 5.4 CITY-ST               | -ZIP  |   |   |                        |                         |
|   |   | □ DELETE                          | 6.1 TITLE                 |   |   |   | ☐ Change               |                         |

CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS