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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #

H - M - G INCORPORATED

(5)

FILED Apr 21 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							** 41811 41811 6	14 11 SESTE (BS)
4672 NORTHWEST 39TH STREET 941 NE 19 AVE FORT LAUDERDALE FL 33319 SUITE 301 FT LAUDERDALE FL 33304						DO NOT WRITE IN THIS	SPACE	
		US				3. Date Incorporated or Qualified 11/25/1986		
<u> </u>	lace of Business	2a. Mailing Address				4. FEI Number	1	Applied For
21		26				65-0000910	1	Not Applicable
Suite, Apt.	•	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
City & State	е	City & State				Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	Cou	intry	/	8. This corporation owes or has paid the cu		
24	25	29	30					□ No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered	Agent	
	SAN, OSAMAH			81	Name			
	72 Northwest 39th Street IRT Lauderdale FL 33319			82 Street Addr		ress (P.O. Box Number is Not Acceptable)		
, ,	THE COURSE			83	<u></u>			•
				84	City	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	atutes, the ab	DOVE d hu	le-named corp v the corpora	poration submits this statement for the purpose of tion's board of directors. Thereby accept the ap,	of observations	its registered
agent. La	m familiar with, and accept the obliq	gations of, Section 607.0505,	Florida Stat	utes	3.	tio 15 board or directors. Thereby accept the ap-	John Chica	s registered
SIGNATURE	Signature, typed or printed name of registered as	pent and the stapped able (0	NOTE: Registeres	l Age	ant signature requi	and when reinstating) DATE	·	
12.	OFFICERS AN	VD DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	D	OT LETE	1,110	I LE			Change	Addition
NAME	MUHAISEN, FAROUK	•	1.2 NA	ME				
STREET ADDRESS	4672 NW 39TH STREET		1.3 ST	RECT	ADDRESS			
CITY+ST-ZIP	FT LAUDERDALE FL	· · · · · · · · · · · · · · · · · · ·	1.4 CII	TY-S	J-ZIP			
TITLE	D	☐ DELETE	21111	LF			☐ Change	Addition
NAME	HASAN, OSAMAH		2 2 NA	ME				}
STREET ADDRESS	4672 NW 39TH STREET		2.3 ST	HEFT	ADDRESS			ļ
CITY-ST-ZIP	FT LAUDERDALE FL	TT NO CERE	2. 4 Ci		31 - 7IP			
TITLE		DETELE	3.1 111				L Change	Addition
NAME			3.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		Distre	34 CI		i1-2IP		T16	
TITLE		L) DECETE	4.1 717		-		Change	☐ Addition
NAME			4. 2 N/					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CIT 5.1 TIT		1 - ZP		Change	Addition
NAME		L_J Octob			Ì		ட படிழ	Mudden)
STREET ADDRESS			52 NA		ADDOLOG			
					ADDRESS			
CITY-ST-ZIP TITLE		[] DELET€	5.4 C/T 6.1 T/T		1-414		Change	☐ Addilion
NAME		ב ומונונ					change	☐ vaninay
STREET ADDRESS			6 2 NA		1DDDCCC			
			•		ADDRESS			
CITY-ST-ZIP			64 01	Y - \$1	(-7(P			I

14. Thereby 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 offoct 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 13 if changed, or on an attachment with an address.