

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # K65714

(3)

1. Corporation Name

HYPERION INVESTMENT CORPORATION

Principal Place of Business

12691 SOUTH DIXIE HWY.,  
MIAMI FL 33156

Mailing Address

12691 SOUTH DIXIE HWY.,  
MIAMI FL 33156-5963

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

VELTMAN, J B  
12691 S DIXIE HWY  
MIAMI FL 33156

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 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD  
VELTMAN, J B  
12691 S DIXIE HWY  
MIAMI FL 33156

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VPS  
VELTMAN, CASSIE  
12691 SO. DIXIE HIGHWAY  
MIAMI FL 33156

TITLE NAME STREET ADDRESS CITY-ST-ZIP

1  
LARSEN, SANDRA  
12691 SO. DIXIE HIGHWAY  
MIAMI FL 33156

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
Apr 02 1997 8:00am  
Secretary of State



3. Date Incorporated or Qualified

02/09/1989

3a. Date of Last Report

04/10/1996

4. FEI Number

65-0100490

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒

Yes

☐

No

10. Name and Address of New Registered Agent

CR2E034 (9/96)

3/24/97 305-238-5341