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

DOCUMENT # K75525

DOVAL CODINGS CODE

FILED Jan 22, 1999 8:00am **Secretary of State** 01-22-1999 90064 012 ***158.75

HUTAL SPHINGS CURP.					
			-		(81) 100) 191) 100) 100) 100)
Principal Place of Business Mailing Address				hend minn deuri alõit didit todt	
ONE S.E. THIRD AVE. STE 3050 MIAMI FL 33131 US ONE S.E. THIRD AVE. STE 3050 MIAMI FL 33131 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
			03/24/1989		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
├ ┐ , , , , , , , , , , , , , , , , , , ,	26			65-0108587	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip 29 30	Country		This corporation owes the current year Int Personal Property Tax.	angible X Yes □ No
				10. Name and Address of New Registered	Agent
ROSENBERG, DONALD S.			Name		
			Ctroot A	ddress (P.O. Box Number is Not Acceptable)	<u></u>
DO ONE S.E. THIRD AVE.		82 Street Add		duress (P.O. Box Number is Not Acceptable)	
STE 3050		83			- 1 T
MIAMI FL 33131	,	84	-		
		04	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 statutes.					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating).					
12. OFFICERS AND D		_13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE DPT	☐ DELETE	1.1 TITLE		3.7	☐ Change ☐ Addition
NAME HOFMANN, ROBERT L.	,				
		1.3 STREET	FADDRESS		
ST-ZIP CORAL SPRINGS FI					

☐ DELETE Addition TITLE ☐ Change DVS 2.1 TITLE NAME ROSENBERG, DONALD S. 2.2 NAME ONE SE THIRD AVE STE 3050 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition NAME; 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP ☐ DELETE ☐ Change Addition TITLE 4.1 TITLE 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP: TILE ☐ DELETE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP nu Propinsion Indiana (ignoral) DELETE 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME NAME COLOR SETTING 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify 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 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 torporation or the required or sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in pances, of or at the chapter of the chapte

CR2E034 (11/98)