

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K95841 (8)
1. Corporation Name
H.L.L., INC.

Principal Place of Business C/O KENNETH F. CLAUSSEN 701 BRICKELL AVE., SUITE 1800 MIAMI FL 33131 US	Mailing Address C/O KENNETH F. CLAUSSEN 701 BRICKELL AVE., SUITE 1800 MIAMI FL 33131 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3100 N.W. 72 Ave. Suite, Apt. #, etc 22 Suite # 116 City & State 23 Miami, FL. Zip 24 33122 Country 25 USA	2a. Mailing Address 26 3100 NW. 72 Ave. Suite, Apt. #, etc 27 Suite 116 City & State 28 Miami, FL. Zip 29 33122 Country 30 USA	3. Date Incorporated or Qualified 06/13/1989 4. FEI Number 65-0157224 Applied For Not Applicable 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent CLAUSSEN, KENNETH F. 701 BRICKELL AVE. SUITE 1800 MIAMI FL 33131	10. Name and Address of New Registered Agent 81 Name Gabriel Prats 82 Street Address (P.O. Box Number is Not Acceptable) 151 Majorca Avenue, #C 83 84 City Coral Gables FL 85 Zip Code 33134
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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  DATE 4-8-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP
NAME	HERZ, STEFAN	1.2 NAME	HERZ, STEFAN
STREET ADDRESS	701 BRICKELL AVE., SUITE 18TH FLOOR	1.3 STREET ADDRESS	3100 NW. 72 Avenue, #116
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33122
TITLE	VPS	2.1 TITLE	VP&D
NAME	MIRIAM HERZ	2.2 NAME	HERZ, MIRIAM
STREET ADDRESS	701 BRICKELL AVE., 18TH FLOOR	2.3 STREET ADDRESS	3100 NW. 72 Avenue, #116
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33122
TITLE	S	3.1 TITLE	SD
NAME	SUAREZ, JUAN M.	3.2 NAME	SUAREZ, JUAN M.
STREET ADDRESS	701 BRICKELL AVE., 18TH FLOOR	3.3 STREET ADDRESS	3100 NW 72 Avenue, #116
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL 33122
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 is changed, or on an attachment with an address.

SIGNATURE  DATE 04/24/98 (385) 591-3174

CR2E034 (10/97)