

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90040 001 ***300.00

DOCUMENT # P01000108896

1. Entity Name
HSMB CORP.



Principal Place of Business
1926 10TH AVENUE NORTH, SUITE 400
LAKE WORTH, FL 33461

Mailing Address
1926 10TH AVENUE NORTH, SUITE 400
LAKE WORTH, FL 33461

66405219



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01302004

Chg-P

CR2E034 (10/03)

4. FEI Number
52-2357736

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PARRA, OLGA E
1926 10TH AVENUE NORTH
SUITE 400
LAKE WORTH, FL 33461

7. Name and Address of New Registered Agent

Name
Michael Bernstein
Street Address (P.O. Box Number is Not Acceptable)

1926 Tenth Avenue North, Suite 400

City **Lake Worth**

FL

Zip Code **33461**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Michael Bernstein

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

(NOTE: Registered Agent signature required when reinstating)

03/04/04

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SHAPIRO, HONORA
1926 10TH AVENUE NORTH, SUITE 400
LAKE WORTH, FL 33461 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
BERNSTEIN, MICHAEL
1926 10TH AVENUE NORTH, SUITE 400
LAKE WORTH, FL 33461 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
SHAPIRO, STEPHEN J
1926 10TH AVENUE NORTH, SUITE 400
LAKE WORTH, FL 33461 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
HUNTER, MARGARET
1926 10TH AVENUE NORTH, SUITE 400
LAKE WORTH, FL 33461 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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CITY - ST - ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Bernstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/30/04
Date

561-540-6224
Daytime Phone #

MICHAEL BERNSTEIN, PRESIDENT