


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 18, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05000075901**

1. Entity Name  
 HTS PROPERTIES, INC.



Principal Place of Business  
 16058 NE 21ST STREET  
 NORTH MIAMI BEACH, FL 33162 US

Mailing Address  
 16058 NE 21ST STREET  
 NORTH MIAMI BEACH, FL 33162 US



01092007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 20-2984226 Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TEVINI, HELMUT  
 16058 NE 21ST STREET  
 NORTH MIAMI BEACH, FL 33162

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

U00000589956  
 01/18/07-80037-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TEVINI, HELMUT
STREET ADDRESS	16058 NE 21ST STREET
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	VP
NAME	TEVINI, SEPP
STREET ADDRESS	16058 NE 21ST STREET
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	S,T
NAME	TEVINI, TYLA
STREET ADDRESS	16058 NE 21ST STREET
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**  Tyla Tevini **1/9/07**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #