

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90182 013 ***150.00

DOCUMENT # P16886

1. Entity Name

HTS, INC.



Principal Place of Business

1525 NW 3RD ST
SUITE 21
DEERFIELD BEACH FL 33442

Mailing Address

P. O. BOX 269
SAN ANTONIO TX 78291
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

06-1186012

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME COLUCCI, ROBERT
STREET ADDRESS 1525 NW 3RD STREET
CITY- ST- ZIP DEERFIELD BEACH FL 33442

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

TITLE VD ☐ Delete
NAME HARTE, HOUSTON H.
STREET ADDRESS 200 CONCORD PLAZA #800
CITY- ST- ZIP SAN ANTONIO TX

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

TITLE VS ☐ Delete
NAME BLYTHE, DEAN H
STREET ADDRESS 200 CONCORD PLAZA #800
CITY- ST- ZIP SAN ANTONIO TX

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

TITLE VD ☐ Delete
NAME FRANKLIN, LARRY D.
STREET ADDRESS 200 CONCORD PLAZA #800
CITY- ST- ZIP SAN ANTONIO TX

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

TITLE TAS ☐ Delete
NAME ORTIZ, FEDERICO
STREET ADDRESS 200 CONCORD PLAZA #800
CITY- ST- ZIP SAN ANTONIO TX

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

TITLE VP ☐ Delete
NAME HACHER, PAUL STEVEN
STREET ADDRESS 200 CONCORD PLAZA #800
CITY- ST- ZIP SAN ANTONIO FL

TITLE ☒ Change ☐ Addition
NAME Sloane Levy
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-06

210 829 9358

Date

Daytime Phone #