FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P92000002856 (2)**

1. Corporation Name
HAYLEY INVESTMENTS, INC.

Principal Place of Business	Mailing Address
520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI FL 33131	520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/06/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 1395 S. STATE RD 7	26 1395 S. STATE RD 7
Suite, Apt. #, etc. 22 #207	Suite, Apt. #, etc. 27 #207
City & State 23 N. LAUDERDALE, FL	City & State 28 N. LAUDERDALE, FL.
Zip 24 33068 Country 25	Zip 29 33068 Country 30

4. FEI Number: 65-0374795 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GAUSIE, DONALD A INCORRECT SPELLING METRUM REALTY 1395 S. STATE ROAD 7, STE. 207 N. LAUDERDALE FL 33068	91 Name: RONALD GAUSIE 92 Street Address (P.O. Box Number is Not Acceptable) 93 94 City: FL 95 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	11 TITLE	☐ Change ☐ Addition
NAME	FREEMAN, STEPHEN A	12 NAME	
STREET ADDRESS	520 BRICKELL KEY DRIVE	13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	14 CITY-ST-ZIP	
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	MICHA, ALBERTO	22 NAME	900001533909
STREET ADDRESS	520 BRICKELL KEY DRIVE	23 STREET ADDRESS	-07/10/95--01087--018
CITY-ST-ZIP	MIAMI FL 33131	24 CITY-ST-ZIP	****200.00 ****200.00
TITLE	VPST	31 TITLE	☐ Change ☐ Addition
NAME	MICHA, OLGA	32 NAME	
STREET ADDRESS	520 BRICKELL KEY DRIVE	33 STREET ADDRESS	
CITY ST ZIP	MIAMI FL 33131	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS	T.S. 7/4/95	63 STREET ADDRESS	REMITTED BY MAY 1
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 4/17/95 305-948-6400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0129077 CP