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

FILED
95 JUL 14 AM 11:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P92000011337 (2)**

1. Corporation Name
HSH PROPERTIES, INC.

Principal Place of Business	Mailing Address
1323 SOUTH STATE ROAD 7 #440 NORTH LAUDERDALE FL 33068 US	1323 SOUTH STATE ROAD 7 #440 NORTH LAUDERDALE FL 33068 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/10/1992	3a. Date of Last Report: 08/17/1994
4. FEI Number: 65-0372355	☐ 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 s. 199.032,* Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 5082 W. COLONIAL DR.	26 5082 W. COLONIAL DR.
Suite, Apt. #, etc. 22 SUITE # 134	Suite, Apt. #, etc. 27 SUITE # 134
City & State 23 ORLANDO FL	City & State 28 ORLANDO FL.
Zip / Country 24 32808 25 USA	Zip / Country 29 32808 30 USA.

9. Name and Address of Current Registered Agent

CHAMBERS, LORNA
1323 SOUTH STATE ROAD 7
#440
NORTH LAUDERDALE FL 33068

10. Name and Address of New Registered Agent

81 Name: LORNA CHAMBERS
82 Street Address (P.O. Box Number is Not Acceptable): 2457A SOUTH HIAWASSEE
83 ROAD APT# 150
84 City: ORLANDO FL. FL 85 Zip Code: 32835

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 submitting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE: D	☒ Change ☐ Addition
NAME	CHAMBERS, LORNA	12 NAME: CHAMBERS, LORNA	
STREET ADDRESS	1323 SOUTH STATE ROAD 7, SUITE 440	13 STREET ADDRESS: 2457A SOUTH HIAWASSEE RD.	
CITY-ST-ZIP	NORTH LAUDERDALE FL	14 CITY-ST-ZIP: APT # 150 ORLANDO FL. 32835	
TITLE		21 TITLE:	☐ Change ☐ Addition
NAME		22 NAME:	
STREET ADDRESS		23 STREET ADDRESS:	
CITY-ST-ZIP		24 CITY-ST-ZIP:	
TITLE		31 TITLE:	☐ Change ☐ Addition
NAME		32 NAME:	
STREET ADDRESS		33 STREET ADDRESS:	
CITY-ST-ZIP		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		63 STREET ADDRESS:	
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 this 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: LORNA CHAMBERS (PRES.) 7/10/95 407-290 0750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0111452 CP