SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 5/1/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 10: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000014941 (7)**

1. Corporation Name
HRH GROUP, INC.

Principal Place of Business
~~9800 4TH STREET NORTH~~
~~SUITE 204~~
~~ST. PETERSBURG FL 33702~~

Mailing Address
~~9800 4TH STREET NORTH~~
~~SUITE 204~~
~~ST. PETERSBURG FL 33702~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/26/1993
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business
21 1150 Cleveland st
22 Suite, Apt. #, etc. suite 420
23 City & State Clearwater FL
24 Zip 34615 25 Country USA

2a. Mailing Address
26 1150 Cleveland st
27 Suite, Apt. #, etc. suite 420
28 City & State Clearwater FL
29 Zip 34615 30 Country USA

4. FEI Number 59-3171533 — 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

9. Name and Address of Current Registered Agent
HAPANOWICZ, ROBERT J
9800 4TH STREET NORTH
SUITE 204
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent
81 Name: BENJAMIN R RIZZO
82 Street Address (P.O. Box Number is Not Acceptable)
83: 1150 Cleveland st #420
84 City: Clearwater FL 85 Zip Code: 34615

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 X [signature] BENJAMIN R RIZZO 6/7/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	HAPANOWICZ, ROBERT J	12 NAME	HAPANOWICZ ROBERT J
STREET ADDRESS	9800 4TH STREET NORTH, #204	13 STREET ADDRESS	1150 Cleveland st #420
CITY - ST - ZIP	ST. PETERSBURG FL 32702	14 CITY - ST - ZIP	Clearwater FL 34615
TITLE	D	21 TITLE	☒ Change ☐ Addition
NAME	HAPANOWICZ, RONALD W	22 NAME	HAPANOWICZ RONALD
STREET ADDRESS	% 9800 4TH STREET NORTH, #204	23 STREET ADDRESS	1150 Cleveland st #420
CITY - ST - ZIP	ST. PETERSBURG FL 32702	24 CITY - ST - ZIP	Clearwater FL 34615
TITLE	D	31 TITLE	☒ Change ☐ Addition
NAME	RIZZO, BENJAMIN R	32 NAME	RIZZO BENJAMIN
STREET ADDRESS	% 9800 4TH STREET NORTH, #204	33 STREET ADDRESS	1150 Cleveland st #420
CITY - ST - ZIP	ST. PETERSBURG FL 32702	34 CITY - ST - ZIP	Clearwater FL 34615
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	100001532931
TITLE		51 TITLE	-07/10/95--01010-009 ☐ Addition
NAME		52 NAME	****200.00 ****200.00
STREET ADDRESS		53 STREET ADDRESS	RW
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)(k), 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 no address.

SIGNATURE: X [signature] Benjamin R Rizzo 6/7/95 813-298 8307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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