FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000036162 (4)

H.B.H. FINANCIAL SERVICES, INC.

FILED
Mar 19 1998 8:00am
Secretary of State

Principal Place	e of Business	Mailing Address			I HILLE BARBO HIBLE WHILE HIGH ROBE
3410 BILLS RD		3410 BILLS RD			
JACKSONVILLE FL 32207		JACKSONVILLE FL 32207		DO NOT WRITE IN TO	IO ODAOE
				DO NOT WRITE IN TH	IS SPACE
				 Date Incorporated or Qualified 05/19/1993 	
2, Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3186319	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State		City & State		8. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	7 _{IP}	Country	1,000.000.000	
24	25		30	8. This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
24	g Name and Address of Curre		301	10. Name and Address of New Registers	
НО	BLIT, JOHN M		81 Name		
3410 BILLS RD			PO Chook Add	race (B.O. Doy Mumber in Not Accordable)	
JACKSONVILLE FL 32207			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
•/•			83		
			24 2	- manders and factories and the second secon	leel 75 Octo
			64 City	F	85 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				ired when reinstating) DAT	
	Signature typed or printed name of registered ap	ID DIRECTORS INOTE:	Registered Agont signature requi	ADDITIONS/CHANGES TO OFFICERS A	
12. TITLE	D OFFICE HOTEL	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	HOBLIT, JOHN M		1.2 NAME		•
STREET ADDRESS	3410 BILLS RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32207		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE	- Libertal Part - Control Control	Change Addition
NAME	BEACH, JERRY L		2.2 NAME		
STREET ADDRESS	3410 BILLS RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TETLE		DELETE	41 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHTY-S1-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		A
TITLE		☐ D€LĒTE	6 1 TITLE		Change Addition
NAME			6 2 NAMÉ		İ
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	[6 4 CITY-ST-ZIP		

14. Thereby certify that the information supplied with this filing 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 of the receiver or trusted employees 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 or an attachment with an Aridron's

CICALATUDE.

904-346-1020