

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

FILED  
Apr 24 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000048941 (7)

1. Corporation Name

HIDDEN LAKE ESTATES, INC.

Principal Place of Business

Mailing Address

2255 GLADES RD  
STE 301E  
BOCA RATON FL 33431  
US

2255 GLADES RD  
STE 301 E  
BOCA RATON FL 33431  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1993

4. FEI Number

65-0433537

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business  
21 1499 W. Palmetto Park Road

2a. Mailing Address  
26 1499 W. Palmetto Park Road

Suite, Apt. #, etc.  
22 Suite 200

Suite, Apt. #, etc.  
27 Suite 200

City & State  
23 Boca Raton Florida

City & State  
28 Boca Raton Florida

Zip  
24 33486

Country  
25

Zip  
29 33486

Country  
30

9. Name and Address of Current Registered Agent

KODSI AND EINSTEIN PA  
701 W CYPRESS CREEK RD  
STE 302  
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
KODSI, JOSEPH  
2255 GLADES RD STE 301E  
BOCA RATON FL

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
☒ Change ☐ Addition  
1499 W. Palmetto Park Road, Suite 200  
Boca Raton FL 33486

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
KODSI, ALBERT  
2255 GLADES RD STE 301 E  
BOCA RATON FL

☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☒ Change ☐ Addition  
1499 W. Palmetto Park Road, Suite 200  
Boca Raton FL 33486

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
KODSI, DANIEL  
2255 GLADES RD STE 301 E  
BOCA RATON FL

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☒ Change ☐ Addition  
1499 W. Palmetto Park Road, Suite 200  
Boca Raton FL 33486

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

14. I hereby 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 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:

4/17/98 561-347-6844

CR2E034 (10/97)