Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90158 013 \*\*\*150.00

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

. PROFIT \*CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000084730

1. Corporation Name

HJL FIN	ANCIAL GHOUP, INC.		•		
Principal Plac	e of Business	Mailing Address			I 1884 ibst 118 18108 sitti Besit gentt gant berbt neuer Biger segan com gest ze
517 S.W. 1ST AVE. 517 S.W. 1ST AVE. FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 12/13/1993
Principal Place of Business     2a. Mailing Address					4. FEI Number Applied For
21 26				65-0453107 Not Applicab	
Suite, Apt. #, etc.  Suite, Apt. #, etc.  27				5. Certificate of Status Desired   \$8.75 Additional Fee Required	
City & Star	te	City & State			6. Election Campaign Financing Trust Fund Contribution Added to Fees
Zíp 24	Country 25	Zip 29 30	Countr	у	8. This corporation owes the current year Intangible Personal Property Tax.
	9. Name and Address of Current				10. Name and Address of New Registered Agent
			81	Name	
MEE, GLENN R 517 SW FIRST AVE FT LAUDERDALE FL 33301			82	Street Add	ress (P.O. Box Number is Not Acceptable)
			83	3	
			84	City	FL 85 Zip Code
agent. I a	m familiar with, and accept the obligat	t and title if applicable. (NOTE: Re			ad when reinstating) DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD SUCCESS	☐ DELETE	1.1 TITLE		. Change D'Addi
NAME	PAUL, SHELLEY I 517 S.W. FIRST AVE.		1.2 NAME	ET ADDRESS	
STREET ADDRESS	FT. LAUDERDALE FL 33301		1.4 CITY-5		
CITY-ST-ZIP TITLE	TI. DAODENDACE TE 33301	☐ DELETE	2.1 TITLE	31-ZIF	☐ Change ☐ Add
NAME			2.2 NAME		•
STREET ADDRESS			2.3 STREE	ET ADDRESS	
CITY-ST-ZIP			2.4 CITY-	ST-ZIP	
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NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	ET ADDRESS	
CITY-ST-ZIP			3.4, CITY-	ST-ZIP	
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NAME		☐ DELETE	4.1 TTTLE 4. 2 NAME		☐ Change   {_] Addii
STREET ADDRESS		☐ DELETE	4.1 TITLE 4. 2 NAME 4.3 STREE	ET ADDRESS	☐ Change 《 Addi
STREET ADDRESS CITY-ST-ZIP			4.1 TITLE 4. 2 NAME 4.3 STREE 4.4 CITY-5	ET ADDRESS ST-ZIP	☐ Change ☐ Addi
STREET ADDRESS		☐ DELETE	4.1 TITLE 4. 2 NAME 4.3 STREE	ET ADDRESS ST-ZIP	

C/TY-ST-ZIP 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

OELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

954.728.8750

☐ Addition

Change