SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P940000965

FILED Sep 22, 1999 8:00 am Secretary of State

09-22-1999 90011 041 ***550.00



1. Corporation	NEN # P9400	0009657		
i '	TI TIGINO		<u>, </u>	
HUSELI	LI COMMERCIAL PROPERT	Y INVESTMENTS, INC	٠,	
Principal Place	e of Business	Mailing Address		
1628 N. FEDE		1628 N. FEDERAL HWY		
FT. LAUDERDA	ALE FL 33305	FT. LAUDERDALE FL 3	3305	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				01/28/1994
<u> </u>	N	2a. Mailing Address		4. FEI Number Applied For
<u> </u>	Place of Business	⊢¬		65-0467551 Not Applicable
21	M I market to a	26 Suite, Apt. #, etc.		\$8.75 Additional
Suite, Apt. #, etc.		⊢¬		5. Certificate of Status Desired Fee Required
22		City & State		
City & Stat	le .	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year
24	25	29	30	Intangible Personal Property. Yes No
	9. Name and Address of Curre	int Registered Agent		10. Name and Address of New Registered Agent
			81 Name	
í	ROSELLI, H. JOSEPH			Address (P.O. Box Number is Not Acceptable)
	28 N. FEDERAL HWY.		82 Street A	
FT.	LAUDERDALE FL 33305		83	
}				
			84 City	FL 85 Zip Code
11. Pursuani	t to the provisions of sections 607.05	02 and 607.1508. Florida Stat	utes, the above-named oc	progration submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the Star am familiar with, and accept the obli	te of Florida. Such change wa	is authorized by the corpo	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
1		gations or, section our .0303,	Fiorida Statutes.	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registered Agent signature	e required when reinstating) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1,1 TITLE	Change Addition
NAME	ROSELLI, H. JOSEPH	_	1.2 NAME	,
STREET ADDRESS	1628 N. FEDERAL HWY.		1,3 STREET ADDRESS	·
CITY-ST-ZIP	FT. LAUDERDALE FL 33305		1.4 CITY-ST-ZIP	
TITLE	TI. CHOPENDALE TE GOOD		1.1411141	•
NAME	l .	DELETE	2.1 TITLE	Change Addition
		DELETE		Change Addition
]		DELETE	2.2 NAME	. Change Addition
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4. 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: A SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

8-5-99 (9-54)- 56/-850