FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
95 MAR 29 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000090761 (5)

1. Corporation Name
HEG INVESTORS, INC.

Principal Place of Business	Mailing Address
1250 EAST HALLANDALE BEACH BLVD. SUITE 100 HOLLYWOOD FL 33009	1250 EAST HALLANDALE BEACH BLVD. SUITE 100 HOLLYWOOD FL 33009

2. Principal Place of Business	2a. Mailing Address
21 19495 Biscayne Blvd.	26 19495 Biscayne Blvd.
Suite, Apt. #, etc. 22 Suite 906	Suite, Apt. #, etc. 27 Suite 906
City & State 23 Aventura, FL	City & State 28 Aventura, FL
Zip 24 33180 Country 25 Dade	Zip 29 33180 Country 30 Dade

3. Date Incorporated or Qualified: 12/15/1994
3a. Date of Last Report: N/A
4. FEI Number: 65-0560000 ☐ 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

PASTERNACK, MARSHALL R
1221 BRICKELL AVE.
MIAMI FL 33131

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	D	1 1 TITLE	D/P ☒ Change ☐ Addition
NAME	GAMPEL, HARRY	1 2 NAME	
STREET ADDRESS	1250 EAST HALLANDALE BEACH BLVD., STE 1000	1 3 STREET ADDRESS	19495 Biscayne Blvd., Suite 906
CITY ST ZIP	HOLLYWOOD FL 33009	1 4 CITY ST ZIP	Aventura, FL 33180
TITLE		2 1 TITLE	S/T ☐ Change ☒ Addition
NAME		2 2 NAME	Absher, Margo
STREET ADDRESS		2 3 STREET ADDRESS	19495 Biscayne Blvd., Suite 906
CITY ST ZIP		2 4 CITY ST ZIP	Aventura, FL 33180
TITLE		3 1 TITLE	☐ Change ☐ Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY ST ZIP		3 4 CITY ST ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY ST ZIP		4 4 CITY ST ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		6 4 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)(i), Florida Statutes. I further certify that the information indicated on the 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: Harry Gampel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Harry Gampel, President

3/23/95 Date

(305) 937-0010 Daytime Phone #