FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

P95000014919 (1)

SIGNATURE:

HBL EQ	UITY, INC.							
ncipal Place of B	usiness	Mailing Address			I FEBILER EI BIR I BIRT BILLE ABirt (98411 W 2017 W W I	9(4	
20 COMMUNITY		20 COMMUNITY PLA	CE					
MORRISTOWN		MORRISTOWN NJ 0	7960					
					3. Date incorporated or Qualified	3a. Dal	te of Last Rep	iort
					02/22/1995 4. EEI Number		TAP	plied For
Principal Place o	of Business	2a. Mailing Address			22-3352868		↓	ot Applicable
		Suite, Apt. #, etc.					\$8.75	Additional
Suite, Apt. #, etc	C.	27			5. Certificate of Status Desired		Fee Re	quired
City & State		City & State			6. Election Campaign Financing	П	•	May Be
Orly to Ontine		28			Trust Fund Contribution	- intervallable		to Fees
Zip	Country	Zip	Country		B. This corporation has liability for Florida Statutes	r mangibie. is □No	KIX DIJUGI S. I	99.002
	25	29	[30]		10. Name and Address of New		d Agent	
9). Name and Address of Cur	ent negistered Agent	81	Namo				
A T AAN	DODATION CVCTEM		82	Street Add	ess (P.O. Box Number is Not Accept	atile)		
C T CORPORATION SYSTEM 1200 S PINE ISLAND ROAD			62	SHOOL AGO.				
	110N FL 33324		83					
4	ION I E GOOD !		84	City		E		Code
			1		ration submits this statement for the p rd of directors. Thereby accept the ap	<u> </u>	thoughoute re	oistered of
2. LE Mt	D ROBBINS, ERIC	AND DIRECTORS DELETE	13. 1 1 1014 12 NAME		ADDITIONS/CHANGES TO O		☐ Change	Additio
REET ADDRESS	20 COMMUNITY PLACE		1.3 STREET	ADDRESS				
Y-\$1-7iP	MORRISTOWN NJ 0796	0	14 CiTY - S	1 - 7 - 1			Change	Addition
LF		□ DEL€1±	2 1 Hite 2 2 NAME					
ME			23 STREET	ADDRESS				
REET ADDRESS			24 CITY+S				···· • · · · · · · · · · · · · · · · ·	
(Y-S1 ZIP		DELETE	3 1 TITLE				Change	Addition
MÉ			3.2 NAM:					
REET ADDRESS			33 SIRE:					
TY - ST - ZIP		[DELFIE	3.4 City - S 4.1 MULE	31 · 71P			Change	Additi
ILE			4.2 NAME					
AME			43 S1FEL1	TADDRESS				
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TLF		DETETE	5 1 THE				Change	☐ Mad t
AME			5.2 NAME					
TREET ADDIPESS				LADURESS				
1 <u>TY - ST - 7IP</u>		DELETE	5.4 CHY-1	21.7lt			☐ Change	Addit
TLF			62 NAME					
AME TOUCH ADDRESS				I ADDRESS				
STREET ADDRESS			5 4 C TV	C1 70		440 071000	Clorido Ctot	toe Liuder
14. I do horeby	certify that the information sup-	olied with this fring is voluntarily f	urnished and do	es not qualif	, for the exemption stated in Section irate and that my signature shall have this report as required by Chapter 60	1 19,07(3)(k ∈the same f	ega' effect as	if made und
certify that t oath: that la	the information indicated on this ani an officer or director of the	corporation of the receiver or tru	stee empowered	I to execute	irate and that my signature shall have this report as required by Chapter 60	7, Florida S	tatutes; and th	at niy nami
appears in E	Block 12 or Block 13 if chlasse	g, or on arrattacht 1911 with an a	auress.		011 x 3/11	/4/	20/53/	11.15
SIGNATI	IDE: 7/1/1	Mule		Exic F	Public, Dir. 3/261	16	Z-O/ 3.3 / Distinct Phone	