2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

Mar 16, 2007 8:00 am Secretary of State DOCUMENT # P95000041051 1. Entity Name 03-16-2007 90029 011 ***150 00 HONEY PROPERTIES, INC. Principal Place of Business Mailing Address 1720 HARRISON STREET 1720 HARRISON STREET THELOOR # 7 A HOLLYWOOD FL 33020 7TH FLOOR HOLLYWOOD FL 33020 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0593747 Not Applicable Country Zip Country Zip \$8.75 Additional Certificate of Status Desired. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHIKOVSKY, FRED Street Address (P.O. Box Number is Not Acceptable) 1720 HARRISON STREET 7TH FLOOR 井 🤈 🔠 HOLLYWOOD FL 33020 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Recistered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HILL Delete ☐ Change ■ Addition CHIKOVSKY, FRED NAME 1720 HARRISON ST THEL #7A STREET ADDRESS STRULL ADDRESS HOLLYWOOD FL 33020 CITY ST-ZIP CITY ST ZIP HILL □ Defete HILL Change ■ Addition DIAMOND, CAROLE NAME MAM 1720 HARRISON ST, 7TH FLOOR STREET ADDRESS STRUET ADDRESS HOLLYWOOD FL 33020 CHY-ST ZIP mu mit Delete Change ■ Addition ñΛΜi STREET ADDRESS STHEET ADDRESS CITY SE ZIP CHY SI ZIP TITLE Delete mu Addition NAME NAM STREET ADDRESS STREET LADDRESS CITY ST-ZIP CHY SE ZIP ☐ Delete 11111 BIH Change Addition NAMI STREET ADDRESS STREET ADDRESS CHY-ST 7IP CITY ST ZIP ☐ Delete ши ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY S1-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

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