## 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 # P95000046192

HGS CONSULTING, INC.

Principal Place of Business

ME

REET ADDRESS

Y-ST-ZIP

Mailing Address

## FILED Feb 18, 1999 8:00am Secretary of State

02-18-1999 90114 006 \*\*\*150.00



7771 W. OAKLAND PARK BLVD 7771 W. OAKLAND PARK BLVD. SUITE 131 SUITE 131 SUNRISE FL 33351 SUNRISE FL 33351 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business 06/14/1995 2a. Mailing Address 4. FEI Number 21 26 Applied For 65-0596542 Suite, Apt. #, etc. Suite, Apt. #, etc. Not Applicable 22 Certificate of Status Desired \$8.75 Additional 27 City & State Fee Required City & State ' 23 6. Election Campaign Financing \$5.00 May Be 28 Zip Trust Fund Contribution Country Zip Added to Fees Country 24 8. This corporation owes the current year Intangible 25 29 30 9. Name and Address of Current Registered Agent Personal Property Tax. DN0 ☐ Yes 10. Name and Address of New Registered Agent 81 SILVERSTEIN, HARVEY 7771 W. OAKLAND PARK BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 131 83 FT. LAUDERDALE FL 33311-4132 84 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. gent and title il applicable. (NOTE: Registered Agent signature required when reinstating). 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ☐ DELETE 1.1 TITLE NAME SILVERSTEIN, HARVEY G ☐ Change ☐ Addition 1.2 NAME 7771 W. OAKLAND PARK BLVD., #131 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP SUNRISE FL 33351 1.4 CITY-ST-ZIP TITLE ☐ DELETE 2.1 TITLE NAME ☐ Change ☐ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS DITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE MAKE Change Addition 3.2 NAME TREET ADDRESS 3.3 STREET ADDRESS ITY-ST-ZIP 3.4. CITY-ST-ZIP TLE DELETE 4.1 TITLE AME ☐ Change ☐ Addition 4. 2 NAME TREET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP TLE 4.4 CITY-ST-ZIP DELETE 5.1 T/TLF ME ☐ Change ☐ Addition 5.2 NAME REET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP Œ

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 Block 12 or Block 13 if changed, order an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

☐ DELETE

IGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: X 9/2/99 954-572-949

CR2E034 (11/98)

☐ Change

Addition