## 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

P95000052262 (9) **DOCUMENT #** 

HLR CORP.

HLR CORP.				
Principal Place of Business	Mailing Address		29111 11141 41114 HEIG HEIG 61112 1111 1121	
2001 N. OCEAN BLVD. APT. 1404	2001 N. OCEAN BLVD. APT. 1404			
BOCA RATON FL 33431	BOCA RATON FL 33431	3. Date Incorporated or Qualified 07/06/1995	3a. Date of Last Report	
2. Principal Place of Business	2a. Maring Address	4. FEI Number	Applied For Not Applica	
Suite, Apt. #, etc	Suite. Apt. #, etc	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City 8 State	6. Election Campaign Financing	□ \$5.00 May Be	

City & State Trust Fund Contribution 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zip-Country  $Z_{(0)}$ Yes No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name

SEIF, EVAN D 1320 S. DIXIE HIGHWAY **SUITE 830 CORAL GABLES FL 33146** 

82	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City FL	85	Zip Code
	FL.	L.	ito registered o

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

12.	g above typed or printed value of registered layor and the charge label.  OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		) DELETE	1.11111.6	Change Addition
NAME	RECHTER, HERBERT L		1.2 NAME	
STREET ADDRESS	2001 N. OCEAN BLVD., APT. 1404		1.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL 33431		14 CiTY - ST - ZiP	
THILE		DELETE	2 1 TuTuE	Change Addition
NAME			2.2 NAMé	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CiTY-ST_ZIP	
TIFLE		) DELETE	3 1 11TLF	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 C(TY - S1 - Z)P	
TITLE		DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	70000470077
CITY - S1 - ZIP			4.4 C-TY - ST - ZIP	700001789797
TITLE		] DELETE	5 1 TITLE	-04/17/9601045002range Addition
NAME			5.2 NAME	***200.00
STREET ADDRESS			5.3 STREET ADDRESS	4
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		DELETE	6 1 1IELE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY: ST-7IP			6.4 CITY - ST - ZIF	CONTROL CONTROL OF THE CANADA STANDARD

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)(k). 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-96 407 390 0005 SG-4-17-96

Not Applicable

Added to Fees