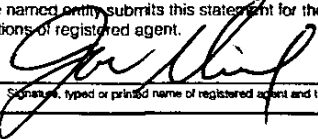
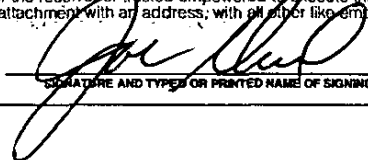


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90358 047 ***150.00

DOCUMENT # P95000082837 1. Entity Name H.T.J., CORP.					
Principal Place of Business 9130 S DADELAND BLVD. 1218 MIAMI, FL 33156			Mailing Address 9130 S DADELAND BLVD. 1218 MIAMI, FL 33156		
2. Principal Place of Business 7035 Beracasa Way Suite, Apt. #, etc.		3. Mailing Address Same as above Suite, Apt. #, etc.			
City & State Boca Raton - FL		City & State Boca Raton - FL		4. FEI Number 65-0623687	
Zip 33433		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GLICK, JOSEPH A -- 9703 S. DIXIE HIGHWAY SUITE 1 MIAMI, FL 33156				7. Name and Address of New Registered Agent Name Same Street Address (P.O. Box Number is Not Acceptable) 9130 S. Dadeland Blvd. Suite 1218 City Miami FL Zip Code 33156	
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  DATE _____ (NOTE: Registered Agent signature required when retesting)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLICK, JOSEPH A 9703 S. DIXIE HWY SUITE 1 MIAMI, FL 33156	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Glick, Joseph A 9130 S. Dadeland Blvd # 1218 Miami - Florida 33156	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	☐ Change ☐ Addition			
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.					
SIGNATURE: 		Date 4-18-05		Daytime Phone # 305-668-8311	

30041101



01262005 Chg-P CR2E034 (10/03)