FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Coordiary Of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000085640 (7)

H.S. INVESTMENTS, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		4 18511801 (14 1814) Allti ABILL BALLI ABILL ABILL ABILL SILE ALINE BIRL BIRL BALL	
6403 NW 102ND TERRACE		6403 NW 102ND TERRACE			
PARKLAND FL \$3076		PARKLAND FL 33076		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	IIO DI ACL
				11/06/1995	-
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0635108	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Regulred
'City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent
181 Name JONATHAK JAMES PAMONTE.					
				dress (P.O. Box Number is Not Acceptable)	1701010
			[] JS.	110 Seminole F	34
	7		83		
	• .		84 City 1		OF Zin Code
				ARGO F	L 85 Zip Code 7 2
11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08. 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 Floridal Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am jamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE Journal Jamoste 4/30/98					
Signifiate, typed or profited notice pregistered agent and title if appropriate (NOTL: Registered Agent signature required when reinstating) LATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
NAME	CDPT	☐ DELETE	1.1 TALE		Change Addition
STREET ADDRESS	BAUS NW TUZNE TEHRAGE		1.2 NAME		
CITY-ST-ZIP	PARKLAND FL 33076		1.3 STREET ADDRESS		i
TITLE	.D	☐ DELETE	1.4 CITY - S1 - ZIP		
NAME	STEWART, CATHERINE		2.1 TITLË		☐ Change ☐ Addition
STREET ADDRESS	6403 NW 102ND TERRACE		2.2 NAME		
CITY-ST-ZIP	PARKLAND FL 33076		2.3 STREET ADDRESS		
TITLE	,	DELETE	2. 4 CITY-S1- 2IP		
NAME			3.1 TITLE		Change Addition
STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 THILE		
NAME		tra orecit	4.1 INCE 4.2 NAME		Change Addition
STREET ADDRESS					
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CHY-ST-ZIP 5.1 TITLE		
NAME .			5.2 NAME	•	☐ Change ☐ Addition
STREET ADDRESS					
CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5.4 C(TY-ST-ZIP 6.1 T(TLE		
NAME			6.2 NAME		Change Addition
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP				•	
	ertify that the information supplied with	this filing does not qualify for	the exemption stated in	Costler 110 07/0Vit Florid Otto	

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, or in an attachment with an address.

SIGNATURE: