SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000088352 (6)

HORIZON BUSINESS ASSOCIATES, INC.

FILED Jul 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
10921 LAKEVIE		10921 LAKEVIEW N. DR.			
PEMBROKE PINES FL 33026		PEMBROKE PINES FL 33026			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
į					11/16/1995
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0623430 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip	Country Zip Cou		Coun	lry	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 Currer	nt Registered Agent			10. Name and Address of New Registered Agent
BAN	D, PETER J			Name	
	21 LAKEVIEW N. DR.		82 Street Ad		ddress (P.O. Box Number is Not Acceptable)
	BROKE PINES FL 33026]'	JU SUBBLA	adiess (F.O. Box Hairiber is Not Acceptable)
			Ī	33	
			1	34 City	FL 85 Zip Code
44 5		2 and 607 4608 Florida Statute	s the abo	is named say	poration submits this statement for the purpose of changing its registered
l office or	registered agent, or both, in the State am familiar with, and accept the oblig	of Fiorida, Such change was t	uithorized	hy tha corooi	ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (No	OTE: Registere	d Agent signature	required when reinstating) DATE.
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	T	DELETE	1.1 TITL	E	900025032 9 @ge Addition
NAME	BAND, PETER J		1.2 NAM	E	-07/31/9801001023
STREET ADDRESS	10921 LAKEVIEW N. DR.			ET ADDRESS	***150.00
CITY-ST-ZIP	PEMBROKE PINES FL		1,4 CITY		**** [○ □ , □ □ □
TITLE	P	DELETE	2.1 TITL		Change Addition
NAME	BAND, EDITH D	[_] DECE IE	2.2 NAM		onlings rooman
	10921 LAKEVIEW N. DR.			ET ADDRESS	
STREET ADORESS	PEMBROKE PINES FL				
CITY-ST-ZIP			2.4 CITY 3.1 TITL		Change Addition
TITLE		j DELETE	1		☐ Change ☐ Addition
NAME			3.2 NAN		
STREET ADDRESS			1	ET ADDRESS	
CITY-ST-ZIP			3.4 CIT		
TITLE		DELETE	4.1 TITL		Change Addition
NAME			4.2 NAA		
STREET ADDRESS	<u> </u>			EETADDRESS	
CITY-ST-ZIP				ST-ZIP	
TITLE		DELETE	5.1 TITL		Change Addition
NAME			5.2 NAN	E	
STREET ADDRESS			53STR	EET ADDRESS	
CITY-ST-ZIP			5.4 CIT	ST-ZIP	
TITLE		DELETE	6.1 TITL	E	Change Mdditigh
NAME		-	6.2 NAM	IE	* HD
STREET ADDRESS	·		6.3 STR	EET ADDRESS	J\1\1\n^2
CITY-ST-ZIP				-ST-ZIP	

14. 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 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.

Mr. Law on DIAMAGENIE

7/20192 954/423-408

22E034 (5/98)





Horizon Business Associates/ Inc

July 20, 1998

Annual Report Section
Division of Corporation
P.O.Box 6327
Tallahassee, Florida 32314

Dear Sir/Ms.:

As per the information given to me by telephone on July 20, 1998; by a Ms. Tonya McGriff, I am inclosing the following information:

The notice of yearly "1998 Profit Corporation Annual Report" received by HBA on July 10, 1998 is the first notice and not the second as indicated on the form. Because of this error, I am requesting that the late fee be waved. If you research our records, you will find that we have always been prompt in all our business dealings with the state and federal governments.

Epclosed you will find check.#1323 for \$150.00 and all required paperwork

Thank you for your attention to this request

Sincerely

Edith R. Diamond

Edith Riving

Président

Quality & Excellence Thru Training .