

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090059 (3)

1. Corporation Name

HYPOLUXO ROAD CORP.



Principal Place of Business

4919 RIDGEWOOD RD
BOYNTON BEACH FL 33436

Mailing Address

4919 RIDGEWOOD RD
BOYNTON BEACH FL 33436

3. Date Incorporated or Qualified

11/22/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

29

30

4. FET Number

65-0627859

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DIAS, STEPHEN
4919 RIDGEWOOD RD
BOYNTON BEACH FL 33436

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

SIGNATURE

Signature typed or printed name of registered agent (if the registered agent is the corporation, the name of the corporation)

Name, Registered Agent Signature (if the registered agent is not the corporation, the name of the registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DP
DIAS, STEPHEN
4919 RIDGEWOOD RD
BOYNTON BEACH FL 33436

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DV
BROWN, JEFFREY W
7580 DUNCREST RD
LAKE WORTH FL 33463

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
DIAS, ROBERT E
4919 RIDGEWOOD RD
BOYNTON BEACH FL 33436

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-22-96

407-499-1804

CR2E034 (12/95)