

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).

FILED

Jul 16 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000009687 (9)

1. Corporation Name

HYLIN ENTERPRISES CORPORATION



Principal Place of Business

21000 NE 28 AVE., STE. 204  
MIAMI FL 33180

Mailing Address

21000 NE 28 AVE., STE. 204  
MIAMI FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1997

4. FEI Number

65-0723617

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 4747 Hollywood Blvd.

Suite, Apt. #, etc.

22 Suite 212

City & State

23 Hollywood FL

Zip

24 33021

Country

25 US

2a. Mailing Address

26 4747 Hollywood Blvd.

Suite, Apt. #, etc.

27 Suite 212

City & State

28 Hollywood FL

Zip

29 33021

Country

30 US

9. Name and Address of Current Registered Agent

JEFFREY SONN, P.A.  
110 TOWER, STE. 1601  
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

Mark S London PA

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

Sheridan Hills Professional Plaza

83

4030-C Sheridan St

84

Hollywood

FL

85

Zip Code

33021

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE

7-8-98

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME FRENKEL, NAHUM

STREET ADDRESS 21000 NE 28 AVE., STE. 204

CITY-ST-ZIP MIAMI FL 33180

TITLE ☐ DELETE

NAME TENTINGER, TIM

STREET ADDRESS 21000 NE 28 AVE., STE. 204

CITY-ST-ZIP MIAMI FL 33180

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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.

SIGNATURE:

*[Signature]* Timothy T. Tentinger 7/8/98 (654) 894-6121

CR2E034 (5/98)