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Apr 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 # P97000013920
1. Corporation Name H. F. PROJECTS & BUSINESS, INC

Principal Place of Business	Mailing Address
8010 WEST DRIVE SUITE 375 NORTH BAY VILLAGE, FL 33141	8010 WEST DRIVE SUITE 375 NORTH BAY VILLAGE FL 33141.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02-12-1997

2. Principal Place of Business	2a. Mailing Address
21 8315 NW 64 STREET	26 8315 NW 64 STREET
Suite, Apt. #, etc. 22: 4	Suite, Apt. #, etc. 27: 4
City & State 23: MIAMI, FL.	City & State 28: MIAMI, FL.
Zip 24: 33166 Country 25: USA	Zip 29: 33166 Country 30: USA

4. FEI Number: 65-0731714 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL. 32301-2525	81 Name: FRANK, MAURICIO H. 82 Street Address (P.O. Box Number is Not Acceptable): 5516 NW 101 CT. 83: DORAL PINES 84 City: MIAMI FL 85 Zip Code: 33178.

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] MAURICIO H. FRANK, VICE PRESIDENT 04-10-98
Signature of registered agent (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	FRANK, HERBERT D.	12 NAME	
STREET ADDRESS	5516 NW 101 CT., DORAL	13 STREET ADDRESS	
CITY-ST-ZIP	PINES, MIAMI, FL 33178	14 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	FRANK, MAURICIO H	22 NAME	
STREET ADDRESS	5516 NW 101 CT., DORAL	23 STREET ADDRESS	
CITY-ST-ZIP	PINES, MIAMI, FL 33178	24 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME	FRANK, LAURA D.	32 NAME	
STREET ADDRESS	5516 NW 101 CT., DORAL	33 STREET ADDRESS	
CITY-ST-ZIP	PINES, MIAMI, FL. 33178	34 CITY-ST-ZIP	
TITLE	D ☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	SANTOS, JOSE RAIMUNDO	42 NAME	
STREET ADDRESS	7860 CAMINO REAL L106	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33143	44 CITY-ST-ZIP	
TITLE	D ☒ DELETE	51 TITLE	☐ Change ☐ Addition
NAME	ANDRADE, SANDRO DOS	52 NAME	
STREET ADDRESS	18181 NE 31 CT. # 2307	53 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33160	54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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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] MAURICIO H. FRANK, VICE PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)