


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000069702
 1. Entity Name
 HILLSBORO INLET PLAZA, INC.



Principal Place of Business... Mailing Address
 2601 E. OAKLAND PARK BLVD. #303 2601 E. OAKLAND PARK BLVD. #303
 FT. LAUDERDALE, FL 33306 FT. LAUDERDALE, FL 33306

DO NOT WRITE IN THIS SPACE



01032005 No Chg-P CR2E034 (10/03)
 4. FEI Number 65-0772699 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 RAMSEY, DAVID W
 2601 E. OAKLAND PARK BLVD. #303
 FT. LAUDERDALE, FL 33306

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	RAMSEY, DAVID W
STREET ADDRESS	2601 E. OAKLAND PARK BLVD. #303
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306
TITLE	DT
NAME	QUAILEY, BRUCE A
STREET ADDRESS	2601 E. OAKLAND PARK BLVD. #303
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306
TITLE	V
NAME	TESSLER, ERIC
STREET ADDRESS	2601 E. OAKLAND PARK BLVD. #303
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000293849
 04/08/05-80046-016 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David W. Ramsey Date: 4/4/05 Daytime Phone #: 954-566-7485
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR