## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90257 023 \*\*\*150.00

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DUGUNEN #	P97000075462
	I BIUUUUI UTUE

1. Corporation Name

HOT SEX, INC.			
			.
Principal Place of Business	Mailing Address		r 18811881 ins latit falm Agitt Batti Sant sallt later aren eines Aus nat land
6363 SW SECOND STREET	6363 SW SECOND STREET		
MARGATE FL 33068	MARGATE FL 33068		DO NOT WEITE IN THE OPACE
			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed
			08/29/1997
District Blood of Business	2a. Mailing Address		4. FEI Number Applied For
2. Principal Place of Business			65-0792456 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State \$150,0000, to 30000	City & State		6. Election Campaign Financing \$5.00 May Be
23 25 25 25 25 27 27 28	28		Trust Fund Contribution Added to Fees
Zip DE TOOL & NOuntry	Zip	Country	8. This corporation owes the current year Intangible
24 25	29	30	Personal Property Tax.
9. Name and Address of Curre			10. Name and Address of New Registered Agent
Section 1 Section 1		81 Na	Name
SINGER, STEVEN M		82 Str	Street Address (P.O. Box Number is Not Acceptable)
801 NE 167TH STREET		02   30	Officer Address (F.O. DOX Hallinon is Harri exceptation)
SUITE 302		83	
NORTH MIAMI BEACH FL 33162	•	84 Cit	City 85 Zip Code
11. Pursuant to the provisions of Sections 607.0	502 and 607,1508, Florida Statute	s, the above-nar	named corporation submits this statement for the purpose of changing its registered e corporation's board of directors. I hereby accept the appointment as registered
office or registered agent, or both, in the State	te of Florida. Such change was au pations of. Section 607.0505. Flori	ithorized by the c ida Statutes	e corporation's board of directors. I hereby accept the appointment as registered
· ·	,		
SIGNATURE Signature, typed or printed name of registered a	gent and title if applicable. (NOTE:	Registered Agent signa	ignature required when reinstating) DATE
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE BP/C/D	☐ DELETE	1.1 TITLE	PICID Signature Addition
NAME PENDOLA, CHRISTOPHER G		1.2 NAME	Pendola, Christopher G
STREET ADDRESS 6367 SW SECOND STREET		1.3 STREET ADDR	
CITY-ST-ZIP MARGATE FL 33068		1.4 CITY-ST-ZIP	A Law A Law .
TITLE V	□ DELETE	2.1 TITLE	Pendola, Marshal  DRESS 6363 Sw 22 St
NAME PENDOLA, MARSHA L		2.2 NAME	Pendott, 17 cm
STREET ADDRESS 6367 SW SECOND STREET		2.3 STREET ADDR	DDRESS 6363 S 4 A 5 3 2062
CITY-ST-ZIP MARGATE FL 33068		2. 4 CITY-ST-ZIP	
TITLE S	☐ DELETE	3.1 TITLE	G Change AAddition
NAME PENDOTA BITA	me	3.2 NAME	Pendola, Rita, Corrace 3244 N.W. 104 terrace
STREET ADDRESS 3244 TW. 104th Ter	, 200	3.3 STREET ADDR	DDRESS 3244 N.W. 104 100 7
CITY-ST-ZIP SUNTISCIFF 33351		3.4. CITY-ST-ZIP	ZIP SUNRISE ICC 3-3-57 5835 1
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	1
STREET ADDRESS		4.3 STREET ADDR	DORESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME .		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDR	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME The Stands & Stands		6.2 NAME	
STREET ADDRESS	•	6.3 STREET ADDR	DORESS
		6.4 CITY+ST-ZIP	I

ties no qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an expression of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address, with all other like empowered. 14. I hereby certify that the information supplied with his dinadicated on this annual report or supplemental annual epo officer or director of the corporation or the receiver of trusted Block 12 or Block 13 if changed or on an attachment with a

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR