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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B.-Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000075561 (5)

FILED May 18 1998 8:00am Secretary of State

HD INT	rernational inc.								
Principal Plac	ee of Business	Mailing Address			\dashv	I BERKUTAK DIA TARAH DARAH BARIK BARIK BARIK BARIK BARIK BARIK			
BOCA RATOR	6 INGLEWOOD TERRACE 3066 INGLEWOOD TERRACE CA RATON FL 33431 BOCA RATON FL 33431				- 1				
					L	DO NOT WRITE IN THIS SPACE			
•					- [3. Date Incorporated or Qualified			
2, Principal Place of Business , 2e, Mailing Address ,						08/29/1997 4. FEI Number			┨
	Ingle wood Tell	28. Mailing Address 26 3 066 In	9/00	wood Te	11	65-0796784	 	pplied For ot Applicable	-
Suite, Apt.		Suite, Apt. #, etc.	<u> </u>					Additional	1
22		27		- 1	5. Certificate of Status Desired NO		equired	1	
City & Stat	Baca Raton FL 28 boca Raton					6. Election Campaign Financing Trust Fund Contribution		May Be	1
23 <u>Boca</u>		28 BOCA KOLTON				······		to Fees	4
Zip 331	131 25 Palm Beach	{	30 Pa	Im Bea	_/1	This corporation owes or has paid the of Personal Properly Tax due June 30. Name and Address of New Registers	☑ Yes [langible No	
144	9. Name and Address of Current	Hadistalag Again		81 Name		ID. Maille and Modiess of Mew Medisters	G WARLIT		1
JAIN, METI									1
BOCA RATON FL 33431				82 Street Ad	eet Address (P.O. Box Number is Not Acceptable)				
				83					
			-	-				<u> </u>	1
				84 City		F	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida Statule	s, the ab	ove-named co	orpora	ation submits this statement for the purpose 's board of directors. I hereby accept the a	of changing i	ts registered	1
agent La	registered agent, or both, in the state of am f <mark>amili</mark> ar with, and accept the obligati	ons of, Section 607.0505, Flo	rida Statu	iles.	ration	s board or directors. Thereby accept the a	ppointment as	registered	1
SIGNATURE (1) THE MARCH 31 1778									
	Sign of our aintest name of top 186 OF ICERS AND			Agent signature rec	quired v	when reinstating) DaffE	NO DIDECTO	20 (b) 40	18
12.	Preside &	DELETE	13.	.F		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	100
NAME	DIPTI TAIN		1.2 NAI	ľ					_
STREET ADDRESS	3066 Inglewood	Tell,	1351	EF1 ADDRESS					FUSA
CITY-\$T-ZIP	Boxa Robon, FL	- 3343/	1.4 C(T	Y-S1-71P					12
TITLE		DELETE	2.1 711	.ŧ			Change	Addition	ľ
NAME			2.2 NA	ME					
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	2. 4 CH	Y-ST-ZIP			Change	Addition	ł
NAME			3.1 MA				Unalige	Notified	1
STREET ADDRESS	_			FFT ADDRESS					1
CITY-ST-ZIP				Y-\$1-ZIP					
TITLE		DELETE	4.1 101				Change	Addition	1
NAME			4 2 NA	ME					
STREET ADDRESS			4.3 STF	EET ADDRESS					ı
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP					
TITLE		☐ DELETE	5.1 TIT	.E	·		Change	Addition	
NAME			5.2 NA	AE					
STREET ADDRESS			5.3 STP	EE1 ADDRESS					ļ
CITY-ST-ZIP		T recent		Y-SI-ZIP			T Observe	A dation	4
TITLE		∟ DELE1E	61 100	"				Addition	
NAME OTREET ADDRESS			6.2 NA						
STREET ADDRESS				EET ADDRESS					
14. hereby c	t certify that the information supplied with	this filing does not qualify to		nption stated	in Se	ction 119.07(3)(i), Florida Statutes. I further	certify that the	information	1
indicated officer or	on this annual report or supplemental a	annual report is true and accu rer or trustee empowered to e	urate and	that my signa	ature s	shall have the same legal effect as if made od by Chapter 607, Florida Statutes; and tha	under oath; th	atlam an	

March 31