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

DOCUMENT # P9700083779

1. Corporation Name

HS ENTERPRISES GROUP, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90112 025 ***150.00



							AN IN NO	
Principal Place	of Business	Mailing Address		111411			JA18 7817 1807	
2800 NORTHWE	ST 55 COURT							
FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309					DO NOT WRITE IN THIS SPACE			
				2 Dáta Incor	porated or Qualifed	THIS SPACE		
				09/29/1	•		1	
2. Principal Place of Business 2 2a. Mailing Address				4, FEI Numb		Anr	lied For	
	- · · · · · · · · · · · · · · · · · · ·		65-0784			Applicable		
21 LAO	# etc. 30 Wac	.# O	_		\$8.75 A			
	PONO Beach		5. Certifcate	of Status Desired	Fee Rec	,		
City & State			6. Election C	ampaign Financing	\$5.00 N			
23	Tonda			Contribution	Added to	Fees		
Zip 🔦 🦪	Country	<u> </u>	Country		ration owes the current ye	ear Intangible		
24 22	069 25	29 30			Property Tax.		No	
	9. Name and Address of Current	Registered Agent		10. Name and	Address of New Regis	tered Agent		
CANE	CHE7 LHIDA		Name	81 Name Hida Day du				
	CHEZ, HILDA NW 55 CT	82 Street A	Address (P.O. Box Nu	mber is Not Acceptable)	0/0.0-	_		
l .				<u>209 N.</u>	<u> </u>	- place		
FIL	AUDERDALE FL 33309		83	2 m Parso	TROOK .	370.		
			84 City	BIII JIANG		85 Zip C	ode	
							3069	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes, ti	he above-named or rized by the corpo	corporation submits the ration's board of dire-	nis statement for the purpo ctors. I hereby accept the	appointment as reg	registered Jistered	
agent. I ar	n familiar with, and accept the obligation	ons of Section 607.0505. Florida	Statutes.	,		_		
SIGNATURE	Z	HILDA SANCH	h /		3.5	4-99		
	Signature, typed or printed name of registered agent	istered Agent signature required when remissating)						
12.	OFFICERS AND		13.	ADDITIONS	1/1	Change	Addition	
TITLE	PSTD		e†	Sancher	141 C/9	H Dlac	_	
NAME	SANCHEZ, HILDA		1.2 NAME	2209	مى سايع		ζ ,	
STREET ADDRESS	2800 NORTHWEST 55 COURT	1	1.3 STREET ADDRESS	Pompak	10 Bonch	37 22	3069	
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NAME			6.3 STREET ADDRESS					
STREET ADDRESS			1					
CITY-ST-ZIP			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, with all other like empowered.