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

PROFIT . **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 15 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 1. Corporation Name P97000099818 (1)

HAMILTON LLOYD INVESTMENTS CORP.

	_						
Principal Plac	e of Business	Mailing Address	Mailing Address		1 164(108) 110 (011) 10011 30111 30111 00111 00111 0111	'ELIB 40181 18181 1918 1981 1811 1881	
1515 N FEDERAL HIGHWAY SUITE 315		1515 N FEDERAL HIGHWAY					
BOCA RATON FL 33432		SUITE 315 BOCA RATON FL 33432		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
9 Principal D	lana of Business	2a. Mailing Address			11/20/1997 4. FEI Number		
2. Principal Place of Business 2a. 21 26		├─-ŋ ਁ	٦		4. FEI NUMBER	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
Zip Country		Zip Country		Trust Fund Contribution	Added to Fees		
24	25]	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curre		1001		10. Name and Address of New Registered		
AR	OU, EDWARD D		81	Name			
1515 N FEDERAL HIGHWAY			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
SUITE 315			83				
BO	CA RATON FL 33432						
			84	City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the above	e-named c	ornoration submits this statement for the numbers	of changing its registered	
office or r agent. La	e <b>gister</b> ed agent, or both, in the State m <mark>famili</mark> ar with, and accept the oblig	e of Florida. Such change was a jations of, Section 607.0505, Flo	authorized by orida Statute:	y the corpo s.	pration's board of directors. Thereby accept the ap	pointment as registered	
SIGNATURE							
12.	Signature, typed or printed name of registered ag	ent and title if applicable (NOT ED DIRECTORS	E: Registored Age	ent signature ra	pourred when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 42	
TITLE	PSTD	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
NAME	ARIOLI, EDWARD D		1.2 NAME			_ • <del>_</del>	
STREET ADDRESS			1.3 STREFT	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY-8	IT-ZIP			
TITLE	D	DELETE 21				☐ Change ☐ Addition	
NAME	FARNSWORTH, THEODORE J		22 NAME				
STREET ADDRESS	1515 N FEDERAL HIGHWAY BOCA RATON FL 33432	SIE 315	2 3 STREET				
CITY-ST-ZIP TITLE	DOOM PATOR FE 33432	DELETE	2. 4 City - : 3.1 Title	51-2112	N OF	Change Addition	
NAME		<del></del>	3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - 5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	1			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S 5.1 TITLE	T-ZIP		Change Addition	
NAME	· ·	books where the	5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP	<u></u>		5.4 CITY-S				
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME	1			
STREET ANOBESS			6.9 070001	ADDOCCC.			

14. I hereby certify that the information indicated on this annual report of su officer or director of the corporation Block 12 or Block 13 if change

y for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an to execute y is report as required by Chapter 607, Florida Statutes; and that my name appears in

vith this filing does not qual tal annual report is true an occiver or trustee empower d