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 # 1. Corporation Name HDS INC. P97000102031 (6)

.

FILED May 14 1998 8:00am Secretary of State



| Principal Place of Business | | Mailing Addr | Mailing Address | | |) (68)(88) in 1819; 1880; 2840; 5810; 4810; 1810; 4810; 1810; 1810; 1810; 1810; 1810; 1810; | | |
|--|---|--|--|------------------------|---------------------------------------|---|-------------------------------|--|
| 611 NW 97TH TERRACE PEMBROKE PINES FL 33024 | | | 611 NW 97TH TERRACE PEMBROKE PINES FL 33024 | | | | | |
| | | PEMBROKE | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | 3. Date Incorporated or Qualified | THIS SPACE | |
| | | | | | | 12/01/1997 | | |
| 2. Principal Pla | ice of Business | 2a. Mailing A | 2a. Mailing Address | | | 4. FEI Number | Applied For | |
| 21 | | 26 | ··· | | | 65 0797 665 | Not Applicable | |
| Sulte, Apt. #, etc. | | Suite, Apl | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional | |
| 22 | | 27 | | | | | Fee Required | |
| City & State | | City & Sta | Crty & State | | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 | | 28] | · | O+ | | | Added to Fees | |
| Zip | Country | Zip | | Country | ′ | 8. This corporation owes or has plaid | | |
| 24 | 25 9. Name and Address of Cut | 29 | 30 | | ···· | Personal Property Tax due June 31 10. Name and Address of New Regli | | |
| 000 | | | | 81 | Name | 10. Textile and Address of New Hogi- | | |
| | RPORATE CREATIONS ENTE | KPRISES, INC. | 13E3, INC. | | | | | |
| | 1 PGA BOULEVARD #211 | 440 | | | Street Ad | Iclress (P.O. Box Number is Not Acceptable |) | |
| PAL | M BEACH GARDENS FL 334 | 118 | | 83 | | | | |
| | | | | 63 | | | 1 | |
| | | | | 84 | City | | 85 Zip Code | |
| | | | 11.5. | | | | FL 63 Zip cocc | |
| 11. Pursuant to | o the provisions of Sections 607. Idi ste red agent, or both, in the S | 0502 and 607,1508, Fl tate of Florida. Such d | iorida Statutes, t hande was autho | ne abovi prized by | e-named co y the corpo | orporation submits this statement for the pur ration's board of directors. I hereby accept | the appointment as registered | |
| agent. I an | n familiar with, and accept the ol | oligations of, Section 6 | 0 7.0 505, Florida | Statute | S. | | | |
| SIGNATURE _ | | | | | · · · · · · · · · · · · · · · · · · · | | DATE | |
| | Signature, typed or portest name of registered | AND DIRECTORS | (NOTE Rec | 13. | ent signature rei | quired when reinstaling) ADDITIONS/CHANGES TO OFFICE | | |
| 12. | h | AND THE CTORS | DELETE | 1.1 DTLE | | ADDITIONS/GITANGES TO GITTIGE | Change Addition | |
| | SHINNERS, HELEN | L | , 5 | 1.2 NAME | | | | |
| NAME | 611 NW 97TH TERRACE | | i i | 1.3 STREET | ADDRESS | | | |
| STREET ADDRESS | PEMBROKE PINES FL 330 | 124 | | 1.4 CITY- S | | | | |
| CITY-ST-ZIP TITLE | | | DELETE | 2.1 TITLE | 51-215 | | Change Addition | |
| | - Decen | | | 2.2 NAME | | | | |
| NAME | | | | 2.3 STREET | ADDOCCC | | | |
| STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP TITLE | | | DELETÉ | 2. 4 CITY -: 3.1 TITLE | 21-211 | | Change Addition | |
| NAME | | L | , | 3.2 NAME | İ | | | |
| | | | Į. | 3.3 STREET | I VUUBEGG | | } | |
| STREET ADDRESS | | | | 3.4. CITY -: | - 1 | | İ | |
| CITY-ST-ZIP TITLE | | | DELETÉ | 4.1 THILE | 31°ZIF | | Change Addition | |
| NAME | | <u></u> | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | | 4.3 STREET | 1 | • | | |
| CITY-ST-ZIP | | | 1 | 4.4 CITY - 9 | | | | |
| TITLE | <u></u> | | DELETE | 5.1 TITLE | 21 4" | | Change Addition | |
| NAME | | _ | | 5 2 NAME | | | | |
| | | | | 5.3 STREET | L ADDRESS | | | |
| STREET ADDRESS | | | | 5.4 City - 9 | | | | |
| CITY-ST-ZIP TITLE | | ····- | DÉLETE | 61 TITLE | JI - EIF | | Change Addition | |
| | | _ | | 62 NAME | | | _ , | |
| NAME OTRECT ADDRESS | | | | | r address | | | |
| STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | | | | 64 CITY-S | 51-ZIF | | | |

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 officers.

1/2/100