## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Aug 06, 1999 8:00 am Secretary of State

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HEC-LUZ, INC-

NAME

STREET ADDRESS
CITY-ST-ZIP

				/			
Principal Place	of Business	Mailing Address				IN 11801 (818) 1011) (8688 1)() 1061	
3917 7TH STRE		3917 7TH STREET V	VEST				
LEHIGH ACRES		LEHIGH ACRES FL					
					DO NOT WRITE IN THIS	S SPACE	
					3. Date Incorporated or Qualified		
					03/30/1998		
<2.∠Principal:Pla	ace of Business	2aMailing Address			4. FEI Number 08 19 139	- Applied For	
21		26			60-0011151	111111111111111	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc	<b>.</b>		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22		City 9 State					
City & State	•	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Co	untry	8. This corporation owes the current year	710000 10 1 000	
24	25	29	30	.c.n.ry	Intangible Personal Property.	Yes No	
[24]	9. Name and Address of Curre	i	1001	T***	10. Name and Address of New Registered	Agent	
	J. 114111 411 1141 1141 1141 1141 1141 1			81 Name		-	
	OCIO, HECTOR			00 00-4 4 4	(D.O. Day Manhar in Not Assessable)		
3917	7 7TH STREET WEST			82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
LEH	IGH ACRES FL 33971			83		- // - // -	
				84 City	FL	85 Zip Code	
11. Pursuant	to the provisions of sections 607.050	2 and 607.1508, Florida S	tatutes, the a	bove-named corpor	ration submits this statement for the purpose of c	hanging its registered	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change	was authorize	ed by the corporation	on's board of directors. I hereby accept the appo	intment as registered	
office or r agent. I a SIGNATURE	im familiar with, and accept the oblig	e of Florida. Such change pations of, section 607.050	was authorize 5, Florida Sta	ed by the corporation	on's board of directors. I hereby accept the appo	entment as registered	
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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.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE: HECTOSIBALPOCHORE RECOLUTIVED

8-1-99

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