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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

STREET ADDRESS

**SIGNATURE:** 

CITY-ST-ZIP



Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

(5)

## **FILED** Feb 25 1998 8:00am Secretary of State

1. Corporatio	11144110	` '				
H.P.C.,	INC.				Larry diversioner sure sure sure bille bille	INTERNATION NOTES AND
Principal Place of Business Mailing Address						
1445 16TH ST APT 12A	TREET	1445 16TH STREET APT 12A				
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139			9		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·
	<del></del>	<del></del>			02/12/1992	
<del></del>	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		65-0388895	Not Applicable  \$8.75 Additional	
22	u, 0.0.	27		5. Certificate of Status Desired	Fee Required	
City & Stat	e	City & State		<del> </del>	6. Election Campaign Financing	\$5.00 May Be
23	<del></del>	28				Added to Fees
Zip	Country	<del> </del> -η	7   Count		<ol> <li>This corporation owes or has paid: Personal Property Tax due June 30</li> </ol>	
24	9. Name and Address of Curr	29 ent Registered Agent	[30]		10. Name and Address of New Regis	<u> </u>
BIGLER, CHAIM				Name		
1445 16TH ST			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
APT 12A					areas (1.0. pox reamber to real people alle)	
MIAMI BEACH FL 33139			8:	3		
			84	City	, , , , , , , , , , , , , , , , , , ,	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida State of Florida, Such change wa	lutes, the above	ve-named cor	rporation submits this statement for the purp ation's board of directors. I hereby accept the	pose of changing its registered
agent la	m familiar with, and accept the obl	igations of Section 607.0505.	Florida Statute	os.	,,,,,	
SIGNATURE	Signatura, typed or printed name of registered a	or a charge title of arrests while	Off Registered A	non stringing too	uired when reinstaling)	DATE
12.		NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME			1.2 NAME			
STREET ADDRESS	1445 18TH ST APT 12A		1.3 STREE	T ADDRESS		
CITY-ST-ZIP			1.4 CITY-			[ ] At
TITLE	STD DETER	DELETE	2.1 TITLE	·		Change Addition
NAME			2.2 NAME		* :	
STREET ADDRESS	*****************			T ADDRESS		
CITY-ST-ZIP TITLE			2 4 CITY 3.1 TITLE	- 51 - ZIF		Change Addition
NAME			32 NAME			
STREET ADDRESS			3 3 STREE	T ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE 4.1				Change Addition
NAME			4. 2 NAMI			
STREET ADDRESS				T ADDRESS		
CITY - ST - ZIP			4.4 CITY -	ST - ZIP		Change Addition
TITLE NAME		L) Mill	5.1 TITLE 5.2 NAME			Thought The William
STREET ADDRESS				T ADDRESS		
CITY+ST-ZIP			5.4 CITY -			
TITLE		DELETE	6.1 TITLE	01-EII		Change Addition
į l						

6.3 STREET ADDRESS

14. Thereby 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 convertion 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.