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

PROFIT CORPORATION ANNUAL REPORT

1998

H C ENTERPRISES, INC.

DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(0)

FILED Mar 13 1998 8:00am Secretary of State



							. 8 18 1 8 18 11 8 18 1			
Principal Place of Br	usinoss	Mailing Address	Mailing Address				i Albin Elbih Albi	B B B B B B B		
8640 S.W. 94TH STREET MIAMI FL 33156		8640 S.W. 94TH STREET Miami Fl 33156				DO NOT WRITE	IN THIS SPA	CE.		
						3. Date Incorporated or Qualified 06/01/1992				
2. Principal Place o	f Business	2a. Mailing Addr	ess			4. FEI Number		Applied For		
21		[26]				65-0337425		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc. 27			Certificate of Status Desired		8.75 Additional Fee Required		
City & State		City & State	l n í			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip [29]				8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. ☑ Yes ☐ No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CANTOR, HOWARD 8840 S.W. 94TH STREET				81	81 Name 82 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FI	L 33156				owood / ladie	area (i i e e e e e e e e e e e e e e e e e				
				83				-		
				84	City		FL	5 Zip Code		
office or register	provisions of Sections 607. red agent, or both, in the St iliar with, and accept the of	tate of Florida. Such chan	qe was authorize	d by	the corporation	oration submits this statement for the property board of directors. I hereby accept	urpose of cha t the appoint	anging its registered ment as registered		
SIGNATURE Simple	se Sybort or constell mane of the unboun	taneot and tile diamns abla	(NCITE Booksey	d Agen	t signature required	d whon reinslating)	DATE			

agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Suparage Aport or present name of regretarity agent and title diapph able (NC							
12.	OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS	IE Registered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	DELETE T	1.1 TOLE	Change Addition					
NAME	CANTOR, HOWARD	1.2 NAME						
STREET ADDRESS	8640 S.W. 94TH ST.	1.3 STREET ADDRESS						
CITY-S1-ZIP	MIAMI FL	1.4 CITY - ST - ZIP						
TITLE	D DELFTE	2.1 THILE	Change Addition					
NAME	CANTOR, HINDA	2.2 NAME						
STREET ADDRESS	8640 S.W. 94TH ST.	2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL	2. 4 CITY - ST - ZIP						
TITLE	D DELETE	3 1 TITLE	Change Addition					
NAME	CANTOR-GIRNUN, JULIE	3.2 NAME						
STREET ADDRESS	10655 S.W. 76TH TERR.	3.3 STREET ADDRESS						
ÇITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP						
TITLE	D DELETE	4.1 TITLE	☐ Change ☐ Addition					
NAME	KAPLAN, ELLEN	4. 2 NAME						
STREET ADDRESS	8300 SW 96 CT	4.3 STREET ADDRESS						
CITY-ST-ZIP	MIAM! FL	4.4 CITY-ST-ZIP						
TITLE	D DELETE	51 TITLE	Change Addition					
NAME	CANTOR, DEBORAH	5.2 NAME						
STREET ADDRESS	8640 S.W. 94TH ST.	5 3 STREET ADDRESS						
CITY+ST-ZIP	MIAMI FL	5 4 CITY-ST-ZIP						
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition					
NAME		6 2 NAMÉ						
STREET ADDRESS		6.3 STREET ADDRESS						
CITY-ST-ZIP		6.4 CITY - ST - ZIP						

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 suppliemental 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 an appearable is the second of the control of