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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 15 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

HASNE	ER REALTY CORPORATION	N			
Principal Plac	ce of Business	Mailing Address		- LIBBII BII BII BII BIBI BIII BIII BIII	
-1-8.E. 4TH-4	WE:	-1-8.E -17H-AVE			
-SUITE-212-				DO NOT WRITE IN	TI UC ODACE
DELRAY BEA	ICH FL 33483	DELRAY BEACH FL 33483		3. Date Incorporated or Qualified	INIS STACE
				'	
2. Principal f	Place of Business	2a. Mailing Address		07/10/1992 4. FEI Number	Applied For
21 // 5	E GTA AVENUE	26 11 52 6/21	PNENUE	65-0356457	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	,	27		J. Continuate of States Desired	Fee Required
City & Stat	10	City & State		6. Election Campaign Financing	55.00 May Be
Zip	Country	28]	Country	Trust Fund Contribution	Added to Fees
24	25	29 3	- '	8. This corporation owes or has paid to Personal Property Tax due June 30.	
	9, Name and Address of Cu		101	10. Name and Address of New Regist	
НА	ASNER, JAY	· · · · · · · · · · · · · · · · · · ·	81 Name		
I .	S.E.4TH AVE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
1 ' '	HTE-212			SE 4th AVENUE	
1	LRAY BEACH FL 33483		83		
)	84 City		85 Zip Code
					FL '
11. Pursuant office or	to the provisions of Sections 607. registered agent, or both, in the S	.0502 and 607 f1508, Florida Statutes State of Monda / Such change was aut	 the above-named corporate 	oration submits this statement for the purp on's board of directors. I hereby accept th	ose of changing its registered appointment as registered
agent. La	am familiar with, and accept the o	bligations of, Section 607.0505, Florid	da Statutes.		e appointment do regioneros
SIGNATURE			≡ni, miyr i i i i i i i i i i i i i i i i i i		
12.	Signature, types or printed game of registers OFFIGERS	ed and free if Applicable (NOTE F AND DIRECTORS	Registered Agent's gnature require 13.	ADDITIONS/CHANGES TO OFFICER:	S AND DIRECTORS IN 12
TITLE	PD /	☐ DELETE	1.1 TITLE	ADDITION OF BUILDING	Change Addition
NAME	HASNER, LLOYD		1.2 NAME		, , , –
STREET ADDRESS	-1-S.E. 4TH AVE.		1.3 STREET ADDRESS	SE GA AVENUE	
CITY-ST-ZIP	DELRAY BEACH FL 33483	3	1.4 CITY - ST - ZIP		
TITLE	STV	☐ DELETE	2.1 TITLE		Change Addition
NAME	HASNER, LLOYD		2.2 NAME		
STREET ADDRESS	~ 1 S.E. 4TH AVE. · · ·		2.3 STREET ADDRESS	SELM AVENUE	
CITY-ST-ZIP	DELRAY BEACH FL 33483		2 4 CITY - \$1 - ZIP		
TITLE		[_] DELETE	3.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			3 2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		☐ DELETE	3.4. CITY- S1 - 7IP 4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		☐ DELET E	51 TITLE		Change Addition
NAME			5.2 NAME	, ylı <	
STREET ADDRESS			5.3 STREET ADDRESS	JC 4/15	
CITY-ST-ZIP		to the state of th	5.4 CITY - ST - ZIP		1 - Table 1 - Ta
TITLE		☐ DELETE	6.1 TITLE	- 100002485 -04/15/9801042	hange Addition
NAME			6.2 NAME	***308.75	O19
STREET ADDRESS			6.3 STREET ADDRESS	r r www.q q @	
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

14. Thereby certify that the information supplied with this filling does indicated on this annual report or supplied that annual report is officer or director of the corporation of the receiver or trusted en Block 12 or Block 13 if changed, or on an attachment with a of alify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rule and accurate and that my signature shall have the same legal effect as if made under oath; that I am an accurate and that my name appears in