SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 21 PM 12:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # V63018 (8)

1. Corporation Name
HILLSDALE, INC.

Principal Place of Business
701 E. GULF BLVD.
INDIAN ROCKS BEACH FL 34635

Mailing Address
701 E. GULF BLVD.
INDIAN ROCKS BEACH FL 34635

3. Date Incorporated or Qualified: 09/10/1992
3a. Date of Last Report: 03/18/1994
4. FEI Number: 59-3145951 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21 309 HARBOR DRIVE
22 Suite, Apt #, etc: —
23 City & State: BELLEAIR BEACH, FLA.
24 Zip: 34634
25 Country: U.S.A.

2a. Mailing Address
26 309 HARBOR DRIVE
27 Suite, Apt. #, etc.: —
28 City & State: BELLEAIR BEACH, FLA.
29 Zip: 34634
30 Country: U.S.A.

9. Name and Address of Current Registered Agent
FOX, GREGORY A.
2380 DREW ST.
SUITE 3
CLEARWATER FL 34625

10. Name and Address of New Registered Agent
81 Name: FOX, GREGORY A.
82 Street Address (P.O. Box Number is Not Acceptable): 28050 U.S. 19N
83 SUITE 100
84 City: CLEARWATER FL
85 Zip Code: 34621

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DVP	1.1 TITLE	DVP	☒ Change ☐ Addition
NAME	SZASZ, STEVE	1.2 NAME	SZASZ, STEVE	
STREET ADDRESS	701 E GULF BLVD	1.3 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	1.4 CITY ST ZIP	BELLEAIR BEACH, FL. 34634	
TITLE	DS	2.1 TITLE	DS	☒ Change ☐ Addition
NAME	GOMORY, GEORGE	2.2 NAME	GOMORY, GEORGE	
STREET ADDRESS	701 E. GULF BLVD.	2.3 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	2.4 CITY ST ZIP	BELLEAIR BEACH, FL 34634	
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	SHAVITT, VERONICA	3.2 NAME	SHAVITT, VERONICA	
STREET ADDRESS	701 E. GULF BLVD.	3.3 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	3.4 CITY ST ZIP	BELLEAIR BEACH, FL. 34634	
TITLE	DT	4.1 TITLE	DT	☒ Change ☐ Addition
NAME	KORDA, EDITH	4.2 NAME	KORDA, EDITH	
STREET ADDRESS	701 E. GULF BLVD.	4.3 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	4.4 CITY ST ZIP	BELLEAIR BEACH, FL. 34634	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	BALOG, JANOS	5.2 NAME	BALOG, JANOS	
STREET ADDRESS	701 E. GULF BLVD.	5.3 STREET ADDRESS	309 HARBOR DRIVE.	
CITY ST ZIP	INDIAN ROCKS BCH FL	5.4 CITY ST ZIP	BELLEAIR BEACH, FL 34634	
TITLE	D	6.1 TITLE	D	☒ Change ☐ Addition
NAME	BOZOKI, GEROGE	6.2 NAME	BOZOKI, GEORGE.	
STREET ADDRESS	701 E. GULF BLVD.	6.3 STREET ADDRESS	309 HARBOR DRIVE.	
CITY ST ZIP	INDIAN ROCKS BCH FL	6.4 CITY ST ZIP	BELLEAIR BEACH, FL 34634	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] STEVE SZASZ 7/17/95 865-0198
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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