

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 415216

**FILED**  
**Jan 30, 2017**  
**Secretary of State**  
**CC8339679047**

**Entity Name:** H.B.A. CORPORATION

**Current Principal Place of Business:**

5310 NW 33RD AVE. STE. 211  
FT. LAUDERDALE, FL 33309-3319

**Current Mailing Address:**

5310 NW 33RD AVE. STE. 211  
FT. LAUDERDALE, FL 33309-3319

**FEI Number:** 59-1446849

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WEISMAN, ANDREW S  
C/O MHS  
5310 NW 33 AVE., #211  
FORT LAUDERDALE, FL 33309 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            D  
Name            WEISMAN, BARTON D  
Address        5310 NW 33RD AVE. STE. 211  
City-State-Zip: FT. LAUDERDALE FL 33309-3319

Title            SD  
Name            LIPSCHUTZ, HOWARD  
Address        550 SO OCEAN DR, APT 604  
City-State-Zip: BOCA RATON FL

Title            PD  
Name            WEISMAN, ANDREW S  
Address        5310 NW 33 AVENUE #211  
City-State-Zip: FORT LAUDERDALE FL 33309

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANDREW S WEISMAN

**PRESIDENT**

**01/30/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date