

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 692804

1. Entity Name

HICKS INDUSTRIES, INC.

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90073 047 ***150.00

Principal Place of Business

13399 NW 113 AVE ROAD
MIAMI FL 33178

Mailing Address

13399 NW 113 AVE RD
MIAMI FL 33178-3103
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2112812**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HICKS, DANIEL
13399 N. W. 113TH AVE RD
MIAMI FL 33178

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PS	☐ Delete
NAME	HICKS, DANIEL J.	
STREET ADDRESS	20521 S.W. 50 PLACE	59 Fairview Blvd.
CITY-ST-ZIP	FT. LAUDERDALE FL	Ft. Myers Bch. FL 33931
TITLE	VP	☐ Delete
NAME	HATFIELD, STEPHEN	
STREET ADDRESS	20521 S.W. 50 PLACE	6690 Breckenridge Ct.
CITY-ST-ZIP	FT. LAUDERDALE FL	Lakeland, FL 33803
TITLE	T	☐ Delete
NAME	CONSTANCE HICKS	
STREET ADDRESS	20521 S.W. 50 PLACE	59 Fairview Blvd.
CITY-ST-ZIP	FT. LAUDERDALE FL	Ft. Myers Bch., FL 33931
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daniel J. Hicks PRESIDENT 1-6-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #