FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91836 011 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F72578

80113540

1. Entity Name
H.W. GAY ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2851 NE 183RD STREET 2117 E AVENTURA, FL 33160 US	P O BOX 6038 BOCA RATON, FL 33427 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
250 N. DIXIE HWY	250 N. DIXIE HWY
Suite, Apt. #, etc. #8	Suite, Apt. #, etc. #8
City & State HOLLYWOOD, FL	City & State HOLLYWOOD, FL
Zip 33020 Country	Zip 33020 Country

4. FEI Number 59-2183935 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GAY, HERBERT W. JR.
2851 NE 183RD STREET
SUITE 2117 E
AVENTURA, FL 33160

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! Fee is $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	GAY, HERBERT W. JR.	
STREET ADDRESS	2851 NE 183RD STREET, SUITE 2117 E	
CITY-ST-ZIP	AVENTURA, FL 33160	
TITLE	VP	☒ Delete
NAME	MORGAN, ROBERT	
STREET ADDRESS	2310 GRANT ST	
CITY-ST-ZIP	HOLLYWOOD, FL 33020	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: H W Gay 4/30/03 305-608-5544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR. Date Daytime Phone #