## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # J90733**

1. Entity Name

## HARTRUN CORPORATION

TIANTHON O	OBFORATION					
Principal Place of B	Business	Mailing Address				
10 JIMMY MARK PLA ST AUGUSTINE FL 32 US		10 JIMMY MARK PI St augustine fl US	•			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country			

## **FILED** May 08, 2000 8:00 am Secretary of State

05-08-2000 90085 022 \*\*\*150.00



PELLICE 28 COR ST AUG  8. The above na  SIGNATURE  9. This corporat Tax filing requires (See criteria of the corporat) Tax filing requires (See criteria of the corporat) Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 16	Country  6. Name and Address of Cur  CER, CHARLES E.  RDOVA ST GUSTINE FL 32084  amed entity submits this statemed ignature, typed or printed name of registered action is eligible to satisfy its Intanquirement and elects to do so. In on back)	ent for the purpose of character of agent and title if applicable  ngible FIL After M Make Che AND DIRECTORS	(NOTE: Regis (NOTE: Regis LE NOW!!! F MAY 1, 2000 F eck Payable to	City	7. I	FEI Number 59-28 Certificate of Status De Name and Address of Box Number is Not Account.	eptable)  te of Florida.  DAT  aign Financing	\$8.75 Add Fee Require and Agent  Zip Cod  Added	dee	
PELLICE 28 COR ST AUG  8. The above na  SIGNATURE  9. This corporat Tax filing requ (See criteria of  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	6. Name and Address of Cur CER, CHARLES E. RDOVA ST GUSTINE FL 32084  amed entity submits this statemed and entity submits this statemed attion is eligible to satisfy its Intanquirement and elects to do so. TO OFFICERS. CD HARTMANN, HANS-RUDOLF 10 JIMMY MARK PL	ent for the purpose of character in the purpose of charact	(NOTE: Regis (NOTE: Regis LE NOW!!! F MAY 1, 2000 F eck Payable to	Name Street Add City  Stered office or resistered Agent signature EE IS \$150.00 Fee will be \$55 Department of 12.  TITLE NAME	7. I	Certificate of Status De  Name and Address of  Box Number is Not Acc  gent, or both, in the State  einstating)  10. Election Camp  Trust Fund Cor	eptable)  te of Florida.  DAT  aign Financing	\$8.75 Adder	t Applicable ditional d  D  May Be to Fees	
PELLICE 28 COR ST AUG  8. The above na  SIGNATURE  9. This corporat Tax filing requ (See criteria of  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	6. Name and Address of Cur CER, CHARLES E. RDOVA ST GUSTINE FL 32084  amed entity submits this statemed and entity submits this statemed attion is eligible to satisfy its Intanquirement and elects to do so. TO OFFICERS. CD HARTMANN, HANS-RUDOLF 10 JIMMY MARK PL	ent for the purpose of characteristics agent and title if applicable after North Make Che AND DIRECTORS	(NOTE: Regis (NOTE: Regis LE NOW!!! F MAY 1, 2000 F eck Payable to	Name Street Add City  Stered office or resistered Agent signature EE IS \$150.00 Fee will be \$55 Department of 12.  TITLE NAME	7. Indress (P.O. E	Certificate of Status De  Name and Address of  Box Number is Not Acc  gent, or both, in the State  einstating)  10. Election Camp  Trust Fund Cor	eptable)  te of Florida.  DAT  aign Financing	\$8.75 Adder	d d d d d d d d d d d d d d d d d d d	
PELLICE 28 COR ST AUG  8. The above na  SIGNATURE  9. This corporat Tax filing requ (See criteria of  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	CER, CHARLES E. RDOVA ST GUSTINE FL 32084  amed entity submits this statemed and entity submits this statemed attion is eligible to satisfy its Intanquirement and elects to do so. TOPPICERS COPENS OFFICERS OFFI	ent for the purpose of character of agent and title if applicable  ngible FIL After M Make Che AND DIRECTORS	(NOTE: Regis (NOTE: Regis LE NOW!!! F MAY 1, 2000 F eck Payable to	City  Stered Office or resistered Agent signature  EE IS \$150.00  Fee will be \$55  Department of 12.  TITLE  NAME	egistered ag required when re	gent, or both, in the Sta einstating)  10. Election Camp Trust Fund Cor	eptable)  The of Florida.  DAT  aign Financing attribution.	Zip Cod  State Cod  Added	00 May Be	
PELLICE 28 COR ST AUG  8. The above na  SIGNATURE  9. This corporat Tax filing requ (See criteria of  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	CER, CHARLES E. RDOVA ST GUSTINE FL 32084  amed entity submits this statemed and entity submits this statemed attion is eligible to satisfy its Intanquirement and elects to do so. TOPPICERS COPENS OFFICERS OFFI	ent for the purpose of character of agent and title if applicable  ngible FIL After M Make Che AND DIRECTORS	(NOTE: Regis (NOTE: Regis LE NOW!!! F MAY 1, 2000 F eck Payable to	City  Stered Office or resistered Agent signature  EE IS \$150.00  Fee will be \$55  Department of 12.  TITLE  NAME	egistered ag required when re	gent, or both, in the Sta einstating)  10. Election Camp Trust Fund Cor	eptable)  The of Florida.  DAT  aign Financing attribution.	Zip Cod	00 May Be	
28 COR ST AUG  8. The above na  SIGNATURE	RDOVA ST GUSTINE FL 32084  amed entity submits this statemed ignature, typed or printed name of registered attion is eligible to satisfy its Intanquirement and elects to do so, on back)  OFFICERS.  CD HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	agent and title if applicable  rigible FIL After N Make Che  AND DIRECTORS	(NOTE: Regi	City  Stered office or resistered Agent signature  EE IS \$150.00  Fee will be \$55  Department of 12.  TITLE  NAME	egistered ag required when re 0.00 of State	einstating)  10. Election Camp Trust Fund Cor	te of Florida.  DAT  aign Financing atribution.	E \$5.0	00 May Be	
8. The above nated and the street address city-st-zip street address city-street address city-street city-st	amed entity submits this statement and entity submits this statement ignature, typed or printed name of registered attion is eligible to satisfy its Intanquirement and elects to do so, on back)  OFFICERS.  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	agent and title if applicable  rigible FIL After N Make Che  AND DIRECTORS	(NOTE: Regi	stered office or restricted Agent signature EE IS \$150.00 Fee will be \$55 Department of 12. TITLE NAME	required when re  0.00 of State	einstating)  10. Election Camp  Trust Fund Cor	te of Florida.  DAT  aign Financing atribution.	E \$5.0	<b>00</b> May Be	
SIGNATURE  Sig  9. This corporat  Tax filing requ (See criteria of  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	ignature, typed or printed name of registered ation is eligible to satisfy its Intan quirement and elects to do so.  OFFICERS.  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	agent and title if applicable  rigible FIL After N Make Che  AND DIRECTORS	(NOTE: Regi	stered office or restricted Agent signature EE IS \$150.00 Fee will be \$55 Department of 12. TITLE NAME	required when re  0.00 of State	einstating)  10. Election Camp  Trust Fund Cor	te of Florida.  DAT  aign Financing atribution.	E \$5.0	<b>00</b> May Be	
SIGNATURE  Sig  9. This corporat  Tax filing requ (See criteria of  11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	ignature, typed or printed name of registered ation is eligible to satisfy its Intan quirement and elects to do so.  OFFICERS.  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	agent and title if applicable  rigible FIL After N Make Che  AND DIRECTORS	(NOTE: Regi	EE IS \$150.00 Fee will be \$55 Department of 12. TITLE NAME	required when re  0.00 of State	einstating)  10. Election Camp  Trust Fund Cor	DAT aign Financing stribution.	\$5.0 Added	to Fees	
9. This corporate Tax filing requirements of the Corporate Tax filing requirem	ation is eligible to satisfy its Intan quirement and elects to do so. on back)  OFFICERS.  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	ngible FIL After Make Che AND DIRECTORS	LE NOW!!! F MAY 1, 2000 F eck Payable to Delete	EE IS \$150.00 Fee will be \$55 Department of 12. TITLE	) 0.00 of State	10. Election Camp Trust Fund Cor	aign Financing tribution.	\$5.0 Added	to Fees	
9. This corporate Tax filing requirements of the Corporate Tax filing requirem	ation is eligible to satisfy its Intan quirement and elects to do so. on back)  OFFICERS.  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	ngible FIL After Make Che AND DIRECTORS	LE NOW!!! F MAY 1, 2000 F eck Payable to Delete	EE IS \$150.00 Fee will be \$55 Department of 12. TITLE	) 0.00 of State	10. Election Camp Trust Fund Cor	aign Financing tribution.	\$5.0 Added	to Fees	
9. This corporate Tax filing requires (See criteria of See cri	ation is eligible to satisfy its Intan quirement and elects to do so. on back)  OFFICERS.  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	ngible FIL After Make Che AND DIRECTORS	LE NOW!!! F MAY 1, 2000 F eck Payable to Delete	EE IS \$150.00 Fee will be \$55 Department of 12. TITLE	) 0.00 of State	10. Election Camp Trust Fund Cor	aign Financing tribution.	\$5.0 Added	to Fees	
Tax filing requisites (See criteria of See cri	quirement and elects to do so. on back)  OFFICERS  CD  HARTMANN, HANS-RUDOLF  10 JIMMY MARK PL	After Make Che AND DIRECTORS	MAY 1, 2000 Feck Payable to	Fee will be \$55 o Department of 12. TITLE NAME	0.00 of State	Trust Fund Cor	tribution.	☐ Added	to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP S TITLE NAME STREET ADDRESS S TITLE NAME STREET ADDRESS	CD Hartmann, Hans-Rudolf 10 Jimmy Mark Pl		Delete	TITLE NAME	AΩ	DDITIONS/CHANGES	TO OFFICERS A	AND DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	Hartmann, Hans-Rudolf 10 Jimmy Mark Pl			NAME						
STREET ADDRESS CITY-ST-ZIP STITLE NAME STREET ADDRESS CITY-ST-ZIP STITLE NAME STREET ADDRESS	10 JIMMY MARK PL							☐ Change	☐ Addition	
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS				CIDECT ADDRESS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP S TITLE NAME STREET ADDRESS	st augustine fl									
NAME STREET ADDRESS CITY-ST-ZIP STITLE NAME STREET ADDRESS				CITY-ST-ZIP						
STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	PSTD			TITLE				☐ Change	Addition	
CITY-ST-ZIP S TITLE NAME STREET ADDRESS	HARTMANN, LENORA K.			NAME OTHERS ADDRESS						
TITLE NAME STREET ADDRESS	10 JIMMY MARK PL			STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS	ST AUGUSTINE FL							Chongo	Addition	
STREET ADDRESS	* •		00.000	NAME	بساد د .			☐ Change	Addition	
i i				STREET ADDRESS						
				CITY-ST-ZIP						
TITLE				TITLE	-			☐ Change	Addition	
TITLE NAME		ши		NAME						
STREET ADDRESS				STREET ADDRESS						
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE			Delete	TITLE				☐ Change	Addition	
NAME				NAME						
STREET ADDRESS	The state of the s	ing the second second		STREET ADDRESS						
CITY-ST-ZIP	A CONTRACT OF THE STATE OF THE	range in the second sec	I	CITY-ST-ZIP						
TITLE	·		Delete	TITLE				☐ Change	☐ Addition	
NAME		* >		NAME						
STREET ADDRESS		, ! .		STREET ADDRESS	• •	•	t * .	. : •		
CITY-ST-ZIP				CITY-ST-ZIP						
13. I hereby cer								certify that the		
indicated on of the corpo	ertify that the information supplied in this report or supplemental rep	d with this filing does not	t qualify for the	exemption state	d in Section	119.07(3)(i), Florida Si	tatutes. I further	at Lam an officer	ntormation or director	