

## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K37313

1. Entity Name  
367, INC.

Principal Place of Business

Mailing Address

363-367 N. ROYAL POINCIANA BLVD  
MIAMI SPRINGS FL 33166363-367 N. ROYAL POINCIANA BLVD  
MIAMI SPRINGS FL 33166

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-0076033

Applied For

Not Applicable

5. Certificate of Status Desired ☐

Additional

Fees

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HEALEY, JOSEPH E.  
363-367 N. ROYAL POINCIANA BLVD  
MIAMI SPRINGS FL 33166

Name

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

City

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 with title if applicable

NOTE: Registered Agent signature required when replacing

Date

9. This corporation is eligible to satisfy its intangible  
tax filing requirements and elects to do so  
(See criteria on back) ☐FILE NOW!!! FEE IS \$550.00  
After SEPTEMBER 15, 2000 Min. will be \$750.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	HEALEY, JOSEPH E.	
STREET ADDRESS	363-367 N. ROYAL POINCIANA	
CITY-ST-ZIP	MIAMI SPRINGS FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HEALEY, LINDA	
STREET ADDRESS	363-367 N. ROYAL POINCIANA BLVD	
CITY-ST-ZIP	MIAMI SPRINGS FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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 637, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or in an attachment with an address with which the employee is associated.

SIGNATURE:

JOSEPH E. HEALEY

Title

Signature (Printed)

KE

10 of 2

FILED  
00 AUG 24 AM 10:47SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CP-6304 (5-00)



2 of 2

August 21, 2000

Florida Dept of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: 367, Inc./Hurricane Bar & Grill  
Ref # K37313

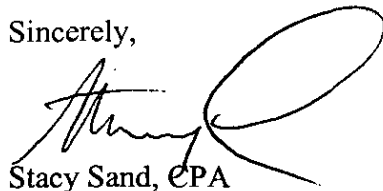
To Whom It May Concern:

I am requesting the removal of \$400 on my client's account. I called your offices about 1 month ago and told the representative that my client did not receive the first notice for the uniform business report. I was told to enclose a letter and to send \$150 with the second notice. I did just that and my client received your notice dated August 11<sup>th</sup> asking for the \$400.

I called today and the representative said that the letter was lost and to do another. I enclose a copy of the UBR that you sent back to my client. My client stated that you did not return his original.

Please review my client's account and remove the \$400 as a one-time courtesy. If you have any questions or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,



Stacy Sand, CPA

Enclosure

cc: Joe & Linda Healey