

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 05, 2001 8:00 am**  
**Secretary of State**

04-05-2001 90080 012 \*\*\*150.00

**DOCUMENT # P00000035747**

1. Entity Name  
**HURRICANEMART.COM, INC.**

Principal Place of Business

Mailing Address

6065 N.W. 167TH STREET  
 BUILDING B-8  
 MIAMI FL 33015

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 BUILDING B-8  
 MIAMI FL 33015

9 5 9 5 8 9



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**6043 NW 167th Street**

**6043 NW 167th Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Build A-6**

**Building A-5**

City & State  
**Miami FL**

City & State  
**Miami FL**

4. FEI Number

**65-1002252**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SEIFER, DAVID**  
**STEARNS WEAVER MILLER WEISSLER, P.A.**  
**150 WEST FLAGLER ST., SUITE 2200**  
**MIAMI FL 33130**

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	<b>Jonathan Nussbaum</b>	<b>6043 NW 167th Street</b>	<b>Building A-5</b> <b>Miami FL 33015</b>		
	<b>Donald Nussbaum</b>	<b>6043 NW 167th Street</b>	<b>Building A-5</b> <b>Miami FL 33015</b>		
	<b>Bryan Norcross</b>	<b>6043 NW 167th Street</b>	<b>Building A-5</b> <b>Miami FL 33015</b>		

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:

*Jonathan Nussbaum*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-01

Date

325 557 2750

Daytime Phone #

CR2E034 (10/00)