

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90202 044 ***150.00

DOCUMENT # P01000043461
 1. Entity Name
THE HJARDEMAAL CORPORATION

Principal Place of Business: **333 NE 103RD STREET MIAMI FL 33138**
 Mailing Address: **333 NE 103RD STREET MIAMI FL 33138**

846256



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **290 NE 61 ST**
 Suite, Apt. #, etc.

3. Mailing Address: **PO Box 530952**
 Suite, Apt. #, etc.

City & State: **Miami, FL**
 Zip: **33137** Country: **USA**

City & State: **Miami Shores, FL**
 Zip: **33153** Country: **USA**

4. FEI Number: **65-1115199**
 Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
HJARDEMAAL, MABEL KETLY
333 NE 103RD STREET
MIAMI FL 33138

7. Name and Address of New Registered Agent
 Name: **Harry J. Hjordemaal**
 Street Address (P.O. Box Number is Not Acceptable): **290 NE 61st Street**
 City: **Miami** State: **FL** Zip Code: **33137**

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: **Hjordemaal** **President** DATE: **4/22/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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	President	<input type="checkbox"/> Delete
NAME	Harry Hjordemaal	
STREET ADDRESS	290 NE 61 ST	
CITY-ST-ZIP	Miami, FL 33137	
TITLE	Valerie Bleuss	<input type="checkbox"/> Delete
NAME	Vice President	
STREET ADDRESS	290 NE 61 ST	
CITY-ST-ZIP	Miami, FL 33137	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	Hermann Hjordemaal	
STREET ADDRESS	290 NE 61 ST	
CITY-ST-ZIP	Miami, FL 33137	
TITLE	COO	<input type="checkbox"/> Delete
NAME	Ketly Hjordemaal	
STREET ADDRESS	290 NE 61 ST	
CITY-ST-ZIP	Miami, FL 33137	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
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)(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: **Harry Hjordemaal** DATE: **4/25/02** DAYTIME PHONE #: **305-258-5334**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)