2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2000 8:00 am
Secretary of State
04-21-2000 90145 021 ***150.00

DOCUMENT # P94000027600

1. Entity Name

HAYDENSTAR, INC.

A30043157

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
30725 SOUTH FEDERAL HWY. HOMESTEAD FL 33030	PO BOX 901489 HOMESTEAD FL 33090-1489 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. BOX 770908
City & State	City & State CORAL SPRINGS, FL 33077
Zip / Country	Zip / Country

4. FEI Number 65-0487069 ☐ 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
LEE, BRUCE 16891 SW 278 ST HOMESTEAD FL 33030	Name Street Address: Kathleen H. Unger 606 NW 112th Way [redacted], FL 33071 City Coral Springs FL Zip Code 33071

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 Kathleen H. Unger-Treas. Kathleen H Unger 3-27-00
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, 2000 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	DC HAYDEN, JOSEPH P 30725 S. FEDERAL HWY. HOMESTEAD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	mailing address: PO Box 770908 Coral Springs, FL 33077-0908	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEE, BRUCE R. 16891 SW 278 ST HOMESTEAD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Kathleen H. Unger 606 NW 112th Way [redacted] FL 33071 Coral Springs,	☐ Change ☒ Addition
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CR2E034 (9/99)

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: Kathleen H. Unger REQUIRED 3-27-00 (954) 755-4518
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Kathleen H. Unger-Treasurer