

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90123 030 ***150.00

DOCUMENT # P96000034723



1. Entity Name
HAMILTON FINE ART & AUCTIONS, INC.

Principal Place of Business
~~1271 NW 110TH AVENUE~~
~~PLANTATION FL 33322~~

Mailing Address
~~1271 NW 110TH AVENUE~~
~~PLANTATION FL 33322~~

2. Principal Place of Business

3. Mailing Address

3601 W. COMMERCIAL BLVD.
Suite, Apt. #, etc.
SUITE 910

Suite, Apt. #, etc.

City & State
PORT LANDERDALE, FL

City & State
FL

Zip
33309

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0660744**

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

HAMILTON, JANICE A
1271 NW 110TH AVENUE
PLANTATION FL 33322

Name **JANICE HAMILTON**

Street Address (P.O. Box Number is Not Acceptable)
1271 NW 110TH AVENUE

City **PLANTATION**

FL

Zip Code **33322**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PVST**
STREET ADDRESS **HAMILTON, JANICE A**
CITY-ST-ZIP **1271 NW 110TH AVENUE**
PLANTATION FL 33322

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HAMILTON, JANICE A**
CITY-ST-ZIP **1271 NW 110TH AVENUE**
PLANTATION FL 33322

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE REQUIRED JANICE A. HAMILTON, PRESIDENT

Date

3/12/03

(954) 777-0696

CR2E034 (10/02)