FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90428 006 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000104525

1. Entity Name
The Law Office of Regina Hunter, P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4144 N. ARMENIA AVE.	
Suite, Apt. #, etc. SUITE 210	Suite, Apt. #, etc.
City & State TAMPA, FLORIDA	City & State
Zip 33607 Country U.S.A.	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3617064 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: REGINA P. HUNTER
Street Address (P.O. Box Number is Not Acceptable): 4144 N. ARMENIA AVE. SUITE 210
City: TAMPA FL Zip Code: 33607

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: Regina Hunter / REGINA P. HUNTER 4/30/02
Signature, type 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) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	DIRECTOR
NAME	REGINA P. HUNTER
STREET ADDRESS	4144 N. ARMENIA AVE., SUITE 210
CITY-ST-ZIP	TAMPA, FL 33607

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Regina Hunter DIRECTOR / REGINA P. HUNTER 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)