

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2002 8:00 am
Secretary of State

01-21-2002 90034 047 ***150.00

0250788 AV

DOCUMENT # 554276

1. Entity Name
HOLLUB HOMES, INC.

Principal Place of Business
7350 S.W. 152ND TERRACE
MIAMI FL 33157

Mailing Address
7350 SW 152 TERRACE
MIAMI FL 33157
US



2. Principal Place of Business
9771 SO Dixie Hwy
 Suite, Apt. #, etc.

3. Mailing Address
9771 SO Dixie Hwy
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL
 Zip
33156
 Country
USA

City & State
Miami, FL
 Zip
33156
 Country
U.S.A

4. FEI Number **59-1778051**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

M & W AGENTS INC.
9100 S. DADELAND BLVD #1707
MIAMI FL 33156

7. Name and Address of New Registered Agent

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HOLLUB, AMELIA E 5780 S.W. 119TH ST MIAMI FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOLLUB, HARRY 11380 S.W. 134 COURT MIAMI FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HOLLUB-ISSEL, HELENE 4957 S.W. 71 PLACE MIAMI FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	9771 SO Dixie Hwy Miami, FL 33156	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Helene Hollub 9771 SO Dixie Hwy Miami, FL 33156	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **1/11/02** Daytime Phone #

CR2E034 (9/01)