

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90273 036 ***150.00

DOCUMENT # P00000100549

1. Entity Name
HOTAE ENTERPRISES, INC.

Principal Place of Business
3103 9TH ST. WEST . #41
BRADENTON FL 34205-6969

Mailing Address
3103 9TH ST. WEST . #41
BRADENTON FL 34205-6969



2. Principal Place of Business
3103 9TH ST W # 20

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SAME

DO NOT WRITE IN THIS SPACE

City & State
BRADENTON

City & State

4. FEI Number **65-1049779**

Applied For
 Not Applicable

Zip
FL

Country
34205

Zip

Country

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

PAEZ, DAGOBERTO
3103 9TH ST W. #41
BRADENTON FL 34205

Name **DAGOBERTO PAEZ**

Street Address (P.O. Box Number is Not Acceptable)

3103 9TH ST W # 20

City **BRADENTON**

FL

Zip Code **34205**

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 | PD | <input type="checkbox"/> Delete |
| NAME | PAEZ, DAGOBERTO | |
| STREET ADDRESS | 3103 9TH ST. WEST #41 | |
| CITY-ST-ZIP | BRADENTON FL 34205-6969 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | GILBERT, GEORGE A | |
| STREET ADDRESS | 3103 9TH ST. WEST #41 | |
| CITY-ST-ZIP | BRADENTON FL 34205-6969 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
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| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|--|---|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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: **SIGNATURE REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02

Date

747-0626

Daytime Phone #

CR2E034 (9/01)