2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 26, 2001 8:00 am Secretary of State **DOCUMENT # 631003** 1. Entity Name **HURTAK'S CORPORATION** 01-26-2001 90108 036 ***150.00 Principal Place of Business Mailing Address % JOHN J. HURTAK % JOHN J. HURTAK 525 N.E. 58TH STREET 525 N.E. 58TH STREET MIAMI FL 33137 MIAMI FL 33137 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2322884 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent د. - بحت Name HURTAK, JOHN J. Street Address (P.O. Box Number is Not Acceptable) **525 N.E. 58TH STREET MIAMI FL 33137** Zip Code FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 . 🗆 -Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLÈ Change ☐ Addition HURTAK, ANDREW EMIL NAME NAME STREET ADDRESS 330 S ROYAL POINCIANA STREET ADDRESS CITY-ST-ZIP MIAMI SPRINGS FL CITY-ST-ZIP TITI F Delete TITLE ☐ Addition X Change HURTAK, MARY NAME NAME KETCHAM, IRENE 13252 NORCROFT RD STREET ADDRESS STREET ADDRESS 1001 BAY ROAD -109-C CITY-ST-ZIP SAN DIEGO CA CITY-ST-ZIP VERO BEACH, FLORIDA 32963 TITLE ☐ Delete TITLE ☐ Change ☐ Addition HURTAK, JOHN J NAME NAME STREET ADDRESS 525 N.E. 58TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 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:

YPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10HN 1 HIRTAK/Secretary-Treasurer

JAN. 11, 2001

305-757-5807

Daytime Phone #