

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702725

FILED
Jan 14, 2009
Secretary of State

Entity Name: HI-C CLUB, INC.

Current Principal Place of Business:

545 W 51 PLACE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

545 W 51 PLACE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-1096818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERBERT, PATTERSON S III
326 WEST 34TH STREET
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: IZZO, ANDREW F.,
Address: 31 W 64TH STREET
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: PATERSON, HERBERT S III
Address: 326 WEST 34TH STREET
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: CAMPBELL, JOHN D
Address: 19900 NW 37 AVE A50
City-St-Zip: OPA LOCKA, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT S> PATTERSON III

TD

01/14/2009

Electronic Signature of Signing Officer or Director

Date