

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90019 016 ****61.25

DOCUMENT # 722158

1. Entity Name

GOAL INCORPORATED

Principal Place of Business

Mailing Address

14040 N.E. 11TH AVENUE
NORTH MIAMI FL 33161

14040 N.E. 11TH AVENUE
NORTH MIAMI FL 33161-3302

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

WINTERS, JOHN F.
14040 N.E. 11TH AVENUE
NORTH MIAMI FL 33161-3302

4. FEI Number

59-1369385

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	HINTERKOPF, ERNEST C.	14040 N.E. 11TH AVENUE	NORTH MIAMI FL 33161-3302	<input type="checkbox"/>
VD	HURTAK, JEROME	14040 N.E. 11TH AVE	NORTH MIAMI FL 33161	<input type="checkbox"/>
SD	GALBRAITH, JOIE	14040 NE 11TH AVE.	NORTH MIAMI FL	<input type="checkbox"/>
TD	BALCH, RICHARD	14040 N.E. 11TH AVENUE	NORTH MIAMI FL 33161-3302	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ernest C. Hinterkopf 1/26/00 305-754-9119

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)