

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732711

1. Entity Name

THE FISHING GLADIATORS, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90026 044 ****61.25

Principal Place of Business

Mailing Address

3028 PARKRIDGE DR.
TALLAHASSEE FL 32310

3028 PARKRIDGE DR.
TALLAHASSEE FL 32310-6837

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

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

HINSON, PRINCE JR.
3028 PARKRIDGE DR.
TALLAHASSEE FL 32310

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/D ☐ Delete
NAME HINSON JR, PRINCE
STREET ADDRESS 3028 PARKRIDGE DR
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V/D ☐ Delete
NAME WYNN, JULIUS
STREET ADDRESS 1206 ALLISON ST.
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME TAYLOR, VERNAL
STREET ADDRESS 2603 GUNN ST.
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Prince Hinson, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRINCE HINSON, JR 576-388
Date 4/28/2000 Daytime Phone #

CR2E037 (9/99)