					1					
CUI	MENT # A9700	0001434				,				-
HACKER ENTERPRISES, LTD.					FILED					
oal Place of Business S.W. 123RD STREET FL 33156		Mailing Address 9740 S.W. 123RD STREET MIAMI FL 33176-4930			OO MAR 13 AM 10: 48 SECRETARY OF STATE TALLAHASSEE, FLORIDA					
_	lace of Business	3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
te, Apt. #, etc.		City's State			4 FELNiumber]
	. Country	Zip_ _F -,	Country		5. Certificate of	65-0768147			Not Applicable Additional	
		<u> </u>	<u> </u>	···				Fee Re	quired	4
	6. Name and Address of Current	Registered Agent		Name	/. Name and A	ddress of New Re	gisterea	Agent		\dashv
ANTON, FRED R O THERREL BAISDEN & MEYER WEISS				Street Address (P.O. Box Number is Not Acceptable)						
11 LINCOLN ROAD MALL, SUITE 500										7
AMI BEACH FL 33139			-	City FL Zip C				Code	\dashv	
e above named entity submits this statement for the purpose of changing its re										
ATURE .	Signature, typed or printed name of registered agent a	and title if applicable (MO)	TE-Rapistarad An	gent signature require	d when reinstatung)		DATE			
	ntributions \$2,239,452.00 on record.	10. Amount of Capi	tal Contribut			11. MAKE CHECK SEE REVERS	(PAYABL E SIDE F	E TO DE	PT. OF STATE INFORMATION	
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS EN	NTITY MUS	ST BE REGIS	TERED AND AC	TIVE WITH THIS	OFFIC	E.	·	7
	GENERAL PARTNER		13.			ADDRESS CHA				┪
ENT#	P97000057016 YORK CAN CORP.			ADORESS						(66/6) 800
address (- ZIP	9740 SW 123RD STREET MIAMI FL 33156		CITY-ST	-ZIP		-03/22/	(10) (10)	1102	011 015	CR2E003
ENT #		'	STREET A	ADDRESS		##***JC! 	3.60	4.54.010.	T-JED:EJ	_ _ _ _
address - Zip			CITY-ST	- ZIP						
ENT #	-	ment of the second	STREET #	ADDRESS			71		-	_
ADDRESS - ZIP			CITY-ST	-ZIP						
ENT# ADDRESS	·		STREET /	ADDRESS						_
r- zu p			CITY-ST	-ZIP						$\frac{1}{2}$
ent# Adoress				ADDRESS						_
[-ZBP ENT#		· · · · · · · · · · · · · · · · · · ·	CITY-ST							-
address			STREET #				<u></u>			-
t-20P hereby o	pertify that the information supplied with on this report is true and accurate and	this filing does not qualify for	or the exemp	ation stated in S	ection 119.07(3)(i)	, Florida Statutes. I	further co	ertify tha	t the information	or l
ne receiv	TURE X MONUS	S report as required by Char FRINTED NAME OF SIGNING GENER	0515 P	rida Statutes	ا باه	_	OJ		-0800	
		<u>.</u>								