

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2001 8:00 am
Secretary of State

01-08-2001 90003 035 ***158.75

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DO NOT WRITE IN THIS SPACE

DOCUMENT # H64098			
1. Entity Name HALIFAX EXPORTERS, INC.			
Principal Place of Business 280 W. ARIEL RD. EDGEWATER FL 32141		Mailing Address 280 W. ARIEL RD. EDGEWATER FL 32141	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2661733		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BARRY PHYLLIS, V. 280 W. ARIEL RD. EDGEWATER FL 32141		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 <i>Phyllis V. Barry</i> <small>Signature typed or printed name of registered agent and title if applicable.</small>		DATE 1-2-01 <small>DATE</small>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> <small>(See criteria on back)</small>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS TITLE P <input type="checkbox"/> Delete NAME BARRY, PHYLLIS V. STREET ADDRESS 280 W. ARIEL RD. CITY - ST - ZIP EDGEWATER FL		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY - ST - ZIP	
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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: PHYLLIS V. BARRY <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 1-03-01 Daytime Phone # 904345-0106	

CR2E034 (10/00)