

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90037 019 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J80831

1. Entity Name

GOODNER'S HALLMARK CARD SHOP INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

123 N. US Hwy #1

Suite, Apt. #, etc.

3. Mailing Address

SAME

DO NOT WRITE IN THIS SPACE

City & State
TEQUESTA, FL

City & State

4. FFI Number

59-2830902

Applied For

Not Applicable

Zip
33469

Country

PALM BEACH

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

GOODNER'S HALLMARK CARD SHOP INC.

Street Address (P.O. Box Number is Not Acceptable)

470 GREGORY A. PIETROWSKI

123 N. US Hwy #1

City

TEQUESTA

FL

Zip Code
33469

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 date of application.

(NOTE: Registered Agent Signature required cover registration)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐10. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPP GREGORY A. PIETROWSKI
16792 133RD DR N.
JUPITER, FL 33478TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
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NAME
STREET ADDRESS
CITY - ST - ZIPDO NOT WRITE
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Gregory A. Pietrowski
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02

Date

561-746-7904

Telephone Number

CR2E034B (12/01)