

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002856

1. Entity Name

HEP-7-WINK, L.C.

FILED

01 FEB 13 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

33 SE 4TH ST., #100
BOCA RATON FL 33432

Mailing Address

33 SE 4TH ST., #100
BOCA RATON FL 33432

2. Principal Place of Business

C/O EZON FLORIDA, INC.

3. Mailing Address

C/O EZON FLORIDA, INC.

Suite, Apt. #, etc.

1100 FIFTH AVE S #401

Suite, Apt. #, etc.

1100 FIFTH AVE S #401

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34102

Country

US

Zip

34102

Country

US

4. FEI Number

65-1009913

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HALVORSEN, JEFFREY T
33 S.E. 4TH STREET, SUITE 100
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name

JACK O. TACKETT

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

1100 FIFTH AVE SOUTH

STE 401

City

NAPLES

FL

Zip Code

34102

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

J. Tackett

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/8/01

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE MGR
NAME HALVORSEN HOLDINGS, INC.
STREET ADDRESS 33 S.E. 4TH STREET, SUITE 100
CITY-ST-ZIP BOCA RATON FL 33432 ☒ Delete

TITLE MGR
NAME GOMEZ, BARRY
STREET ADDRESS 1100 5TH AVENUE SOUTH, SUITE 401
CITY-ST-ZIP NAPLES FL 34102 ☒ Delete

TITLE MGR
NAME GOMEZ, BRUCE
STREET ADDRESS 1100 5TH AVENUE SOUTH, SUITE 401
CITY-ST-ZIP NAPLES FL 34102 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE DP
NAME O. JACK GOMEZ
STREET ADDRESS 1100 FIFTH AVE SOUTH #401
CITY-ST-ZIP NAPLES, FL 34102 ☐ Change ☒ Addition

TITLE DV
NAME JACK O. TACKETT
STREET ADDRESS 1100 FIFTH AVE SOUTH #401
CITY-ST-ZIP NAPLES, FL 34102 ☐ Change ☐ Addition

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

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

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

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/8/01

Date

941-263-1712

Daytime Phone #

CR2E083 (11/00)