2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N01000001477

1. Entity Name



**FILED** May 05, 2003 8:00 am Secretary of State

05-05-2003 90385 003 \*\*\*\*61.25

N, INC.	HI MERCHANIS ASSOCIATIO						
Principal Place of Business	Mailing Address						
2400 BLOCK OF N. FEDERAL HWY LIGHTHOUSE POINT FL 33064	2400 BLOCK OF N. FEDERAL HWY LIGHTHOUSE POINT FL 33064						
2. Principal Place of Business	3. Mailing Address 2436 N. FEDERAL HWY						

			•		! !	183   14 <b>3</b> 31   <b>28</b> 113   <b>88</b> 311   <b>88</b> 311   <b>8</b>	ARIRI (1814 BIBA) (R	EN MER DE		
2. Principal Place of Business  3. Mailing Address 2436 N. FEDERAL			eal H	WY						
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Box # 243					CHECK HERE IF MAKING CHANGES					
City & State City & State		; ·		4. FEI Number 65-1130731		— <del>— —</del>	oplied For ot Applicable			
⊷Zip ∵ *s²	Country	Zip	Count !	ry	5. Certificate of St	atus Desired	\$8.75 Add Fee Required			
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
•				Name						
	ORPORATE SERVICES, INC.			Street Address (P.O. Box Number is Not Acceptable)						
	JTH BISCAYNE BLVD SUITE 3000									
MIAMI FL	L 33131		;							
				City		F	— ,			
	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registered	office or registere	ed agent, or both, in	the State of Florida. I am	n familiar with, a	and accept		
								I		
SIGNATURE										
	Signature, typed or printed name of registered agent a	nd title if applicable. {NOTE	: Registered A	gent signature required	when reinstating)	DATE		ı		
	FILE NOW: FEE IS \$61.25	9. Election Can Trust Fund C		<u> </u>	\$5.00 May Be Added to Fees	Make Ched Florida Depa	ck Payable t ertment of S			
10.	OFFICERS AND DIR	ECTORS	11.	Δ.	DDITIONS/CHANGE	ES TO OFFICERS AND D	VRECTORS IN	10		
ITLE .	DS	Delete	TITLE	<u> </u>	DDITIONS/C/IANGI	13 TO OTT TOERS AND D	☐ Change	Addition		
IAME 4	BROWN, THOMAS M	<b>&gt;</b>	NAME	7246	ER GALL	0		<i>/</i> ' )		
STREET ADDRESS	1110 SW 5TH ST		STREET	ADDRESS 1184	2 NW	13th AVE	_			
CITY-ST-MP	BOCA RATON FL 33486		CITY-ST	-ZIP PEN	IBROKE P	13th AVE INES, FL	330Z6			
TITLE	D	Delete	;TITLE	Dor	JALD WO	RDEN	☐ Change	Addition		
IAME	MILLER, DAVID	-	NAME	D	_	<b>-1</b>				
STREET ADDRESS STY-ST-ZIP	11028 MAINSAIL DR			ADDRESS 2/3	1 NE 33	St		-		
<del> </del>	HOLLYWOOD FL 33023		CITY-ST	- ZIP _ Z.IG	HTHOUSE	POINT FL	<u> 33064</u>			
TTLE IAME	DP Anderson, Peter C	☐ Delete	;TITLE NAME	降		-	∐ Change '	☐ Addition		
TREET ADDRESS	2650 NE 24TH STREET		STREET A	inneess				1		
CITY-ST-ZIP	POMPANO BEACH FL 33064		CITY-ST							
ITLE	D	Spelete	TITLE	D	,,		Change	Addition		
IAME	ISAACS, ROBERT	25000	NAME		- RATZER		Caronange	Addition		
TREET ADDRESS	1201 HIBISCUS AVENUE		STREET A	IDDRESS 2187	O FALL	RIVERLOR				
ITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST	-ZIP BOC	A RATON	FL 33429	ત	J		
ITLE	DT	☐ Delete	;TITLE	PS	7	, - ,	Change	Addition		
AME	BOYD, MARJORIE H		NAME	,			- \			
TREET ADDRESS	5949 NW 74TH ST		STREET A					}		
ITY-ST-ZIP	POMPANO BEACH FL 33067		CITY-ST-	· ZIP						
ITLE	DV	☐ Delete	TITLE				☐ Change	Addition		
AME	DAVIS, CHARLES R		NAME							
TREET ADDRESS	936 SW 14TH AVE		STREET A				•			
ITY-ST-7IP	DEEDEIELD DEACH EL 22444		CITY CT	7(D				1		

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. 954-785-7980

EOURETER C. ANDERSON RESIDENT SIGNATURE: