

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90024 015 ***150.00

0108795

DOCUMENT # P00000021001

1. Entity Name

HURRICANE TECHNOLOGY GROUP, INC.

Principal Place of Business

9051 N.W. 20TH STREET
PEMBROKE PINES FL 33024

Mailing Address

9051 N.W. 20TH STREET
PEMBROKE PINES FL 33024

2. Principal Place of Business

2109 Reston Circle

Suite, Apt. #, etc.

3. Mailing Address

2109 Reston Circle

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Royal Palm Beach, FL

Zip
33411

Country
USA

City & State
Royal Palm Beach FL

Zip
33411

Country
USA

4. FEI Number

65-0987268

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CRAMMER, EDWIN L
7481 W. OAKLAND PARK BLVD.
SUITE #1-2
LAUDERHILL FL 33319

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
D
LEHMAN, DANIEL ROBERT
STREET ADDRESS
9051 N.W. 20TH STREET
CITY-ST-ZIP
PEMBROKE PINES FL 33024 ☐ Delete

TITLE
NAME
D
LEHMAN, JULIE E
STREET ADDRESS
9051 N.W. 20TH STREET
CITY-ST-ZIP
PEMBROKE PINES FL 33024 ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
Lehman, Daniel Robert
STREET ADDRESS
2109 Reston Circle
CITY-ST-ZIP
Royal Palm Beach, FL 33411 ☒ Change ☐ Addition

TITLE
NAME
Lehman, Julie E.
STREET ADDRESS
2109 Reston Circle
CITY-ST-ZIP
Royal Palm Beach, FL 33411 ☒ 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

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: X

Julie Lehman Julie Lehman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(561) 784-4431

CR2E034 (10/00)