

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000026600

1. Entity Name
ALWAYS HOT PRODUCTS, INC.

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90133 050 ***150.00

Principal Place of Business
~~250 BIRD ROAD, SUITE 302~~
~~CORAL GABLES FL 33146~~

Mailing Address
~~* JOSEPH F. LOPEZ-ESQ~~
~~250 BIRD RD-# 302~~
~~CORAL GABLES FL 33146~~



2. Principal Place of Business

✓ 2710 Scott St

3. Mailing Address

c/o Bo Wallin-2710 Scott St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

✓ Hollywood FL

City & State

Hollywood, FL

4. FEI Number

65-0993739

Applied For

Not Applicable

Zip

✓ 33020

Country

✓ USA

Zip

33020

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, JOSEPH F
250 BIRD ROAD, SUITE 302
CORAL GABLES FL 33146

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, 2002 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 AS ☒ Delete
NAME LOPEZ, JOSEPH F
STREET ADDRESS 250 BIRD ROAD # 302
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE PSTD ☒ Delete
NAME WALLIN, BO GOSTA
STREET ADDRESS 250 BIRD ROAD # 302
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE ☐ Delete
NAME Wallin Bo Gosta
STREET ADDRESS 2710 Scott St
CITY-ST-ZIP Hollywood FL 33020

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE PSTD ☒ Change ☐ Addition
NAME WALLIN, BO GOSTA
STREET ADDRESS 2710 Scott St.
CITY-ST-ZIP Hollywood, FL 33020

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

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

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

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

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02

Date

954-954-0171

Daytime Phone #

CR2E034 (9/01)