

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000036779

FILED
Apr 25, 2002 8:00 AM
Secretary of State

Entity Name: HFA MERCHANDISE, INC.

Current Principal Place of Business:

4601 84TH TERRACE NORTH
PINELLAS PARK, FL 33781

New Principal Place of Business:

4134 48TH AVE. SOUTH
ST PETERSBURG, FL 33711

Current Mailing Address:

4601 84TH TERRACE NORTH
PINELLAS PARK, FL 33781

New Mailing Address:

4134 48TH AVE. SOUTH
ST. PETERSBURG, FL 33711

FEI Number: 59-3638729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, TINA L
Address: 4601 84TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD (X) Delete
Name: BUECHNER, NANCY I
Address: 4601 84TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: TD () Delete
Name: SMITH, STEPHEN L
Address: 4601 84TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, TINA L
Address: 4134 48TH AVE. SOUTH
City-St-Zip: ST PETERSBURG, FL 33711

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SMITH, STEPHEN L
Address: 4134 48TH AVE. SOUTH
City-St-Zip: ST PETERSBURG, FL 33711

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN L. SMITH

TD

04/25/2002

Electronic Signature of Signing Officer or Director

Date