## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: >

## **FILED** Mar 12, 2001 8:00 am Secretary of State DOCUMENT # P0000050385 1. Entity Name HATQUEEN.COM. INC. 03-12-2001 90475 008 \*\*\*150.00 Mailing Address Principal Place of Business 2810 E OAKLAND PARK BLVD. SUITE 102 2810 E OAKLAND PARK BLVD. SUITE 102 FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TARNOVE, BILLIE Street Address (P.O. Box Number is Not Acceptable) 2810 E OAKLAND PARK BLVD, SUITE 102 FT LAUDERDALE FL 33306 Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Change ☐ Addition BROWN, SUSAN L NAME STREET ADDRESS 6611 NE 20TH TERR STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP FT LAUDERDALE FL 33308 TITLE TITLE Change ☐ Addition ☐ Delete KELLER, ZOLA NAME NAME STREET ADDRESS STREET ADDRESS 818 E LAS OLAS BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33301 - Change - Taddition TITLE -- \*-Delete: TITLE LANE, KEVIN NAME NAME STREET ADDRESS 105 NE 16TH TERR, APT 1 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33301 TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(1), 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 path; 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

AN L. BROWN