

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000052960

1. Entity Name

HEBSON, INC.

FILED

02 DEC -2 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8301 Southwest 142 Avenue

Suite, Apt. #, etc.

Suite #C204

City & State

Miami, Florida

Zip

33183

Country

3. Mailing Address

8301 Southwest 142 Avenue

Suite, Apt. #, etc.

Suite #C204

City & State

Miami, Florida

Zip

33183

Country

4. FEI Number

65-1015005

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

SPIEGEL & UTRERA, P.A.

Street Address (P.O. Box Number is Not Acceptable)

1840 Southwest 22 Street

4th Floor

City

Miami

FL

Zip Code

33145

**DO NOT WRITE
IN THIS SPACE**

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.

SPIEGEL & UTRERA, P.A.

SIGNATURE

By: *Natalia Utrera*
Natalia Utrera, Vice President

11/26/02

DATE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

PTD

Okoinyan, Pat E.

STREET ADDRESS

8301 Southwest 142 Ave, Ste. #C204

CITY- ST- ZIP

Miami, Florida 33183

TITLE
NAME

SVD

Miriki, Ebikenfa J.

STREET ADDRESS

8301 Southwest 142 Ave, Ste. #C204

CITY- ST- ZIP

Miami, Florida 33183

TITLE
NAME

STREET ADDRESS

CITY- ST- ZIP

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CITY- ST- ZIP

600009249146
11/28/02--01001--008 **300.00

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 master empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other persons empowered.

SIGNATURE:

Ebikenfa J. Miriki, Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Only

Daytime Phone

CR2E034B (12/01)

2072

AFFIDAVIT IN SUPPORT OF
REQUEST TO WAIVE THE
FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA)
)
COUNTY OF MIAMI DADE)

1. Ebikenfa J. Miriki is a Director of HEBSON, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation was administratively dissolved by the Florida Department of State on September 21, 2001.
3. That the Corporation failed to file its 2001 Annual Report or pay the 2001 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
 - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2001 and 2002 Annual Report fees and the filing of its 2001 and 2002 Annual Reports, which are presented simultaneously with this Affidavit.
5. HEBSON, INC. satisfies the requirements of the Florida Statutes 607.0401.
6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 22 day of November, 2002

FURTHER, AFFIANT SAYETH NOT

HEBSON, INC.

By: [Signature]
Ebikenfa J. Miriki, Director

SWORN AND SUBSCRIBED

before me this 22 day of November, 2002.

[Signature]
Notary Public, State of Florida at Large
Printed Name: JUANA R. VALDES
Commission Expires: _____

 Juana R. Valdes
My Commission CC973824
Expires October 8, 2004