

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90150 031 ***150.00

DOCUMENT # P00000066159

1. Entity Name
HATS BY RODENA, INC.

Principal Place of Business

17980 NW 13TH ST
PEMBROKE PINES FL 33029

Mailing Address

17980 NW 13TH ST
PEMBROKE PINES FL 33029

2. Principal Place of Business

158 Coventry Place
 Suite, Apt. #, etc.

3. Mailing Address

158 Coventry Place
 Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

Zip
33418

Country
USA

City & State

Palm Beach Gardens, FL

Zip
33418

Country
USA

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, GONZALES B
17980 NW 13TH ST
PEMBROKE PINES FL 33029

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
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
JOHNSON, ANITA L
17980 NW 13TH ST
PEMBROKE PINES FL 33029

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
JOHNSON, GONZALES B
17980 NW 13TH ST
PEMBROKE PINES FL 33029

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
JOHNSON, GLENDA B
15212 SW 81ST LANE
MIAMI FL 33193

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
JOHNSON, GARY B
504 SORENSEN TRAIL
KELLER TX 76248

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
JOHNSON, STACI B
504 SORENSEN TRAIL
KELLER TX 76248

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
SMALL, KATRINA W
5840 SUNDOWN CIRCLE, TUSCANY BAY APT #308
ORLANDO FL 32822

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)