

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 01, 2001 8:00 am**  
**Secretary of State**

02-01-2001 90180 009 \*\*\*150.00

**DOCUMENT # P00000071388**

1. Entity Name  
**MHHJ, INC.**

Principal Place of Business  
**2329 SOUTH PENINSULA DRIVE  
 DAYTONA BEACH FL 32118**

Mailing Address  
**2329 SOUTH PENINSULA DRIVE  
 DAYTONA BEACH FL 32118**

00012336



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**1316 INT'L SPEEDWAY BLVD.**  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
**DAYTONA BEACH, FL**

City & State

4. FEI Number  
**59-3690484**

Applied For  
 Not Applicable

Zip  
**32114**

Country  
**VOLUSIA**

Zip

Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**HILL, MILLER  
 2329 SOUTH PENINSULA DRIVE  
 DAYTONA BEACH FL 32118**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

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, 2001 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>D HILL, MILLER</b>	<b>2329 SOUTH PENINSULA DRIVE</b>	<b>DAYTONA BEACH FL 32118</b>	<input type="checkbox"/>
	<b>D JORDAN, HENRY</b>	<b>2331 SOUTH PENINSULA DRIVE</b>	<b>DAYTONA BEACH FL 32118</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
	<b>Secretary TRACI JORDAN</b>	<b>2331 S. PENINSULA</b>	<b>DAYTONA BEACH FL 32118</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<b>TREASURER STACEY QUINTAL</b>	<b>2322 Creasant Ridge Rd</b>	<b>DAYTONA BEACH FL 32118</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Miller Hill* **MILLER HILL** **01-25-01** **904-252-0010**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)