## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P0000099436 1. Eritity Name HARTE PEAT AMERICA, INC. 04-26-2001 90306 020 \*\*\*150.00 Principal Place of Business Mailing Address 226 MURRAY COURT 226 MURRAY COURT JUPITER FL 33458-2902 JUPITER FL 33458-2902 2. Principal Place of Business 3. Mailing Address RADCLIFFE COURT 122 RADCUFFE COURT Suite, Apt. #. etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1055461 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THOMPSON **BUSINESS FILINGS INCORPORATED** 1000 WEST AVENUE NO. 1114 MIAMI BEACH FL 33139-0000 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 SIGNATURI 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 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition O'HARTE, THOMAS NAME NAME STREET ADDRESS 287 MARLBERRY CIRCLE STREET ADDRESS CITY-ST-ZIP JUPITER FL 33458 CITY-ST-7IP TITLE Delete TITLE O'HARTE, KAY NAME NAME STREET ADDRESS 287 MARLBERRY CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JUPITER FL 33458 TITLE Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZIP TITLE ☐ Delete DITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP TITLE ☐ Delete TITUE Change ■ Addition 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)(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 tike empowered.

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR