

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

7/2

FILED
Aug 04, 2003 8:00 am
Secretary of State

07-21-2003 90357 015 ***150.00

DOCUMENT # P00000104856

1. Entity Name
HOFF'S, INC.



Principal Place of Business
**1320 SW 2ND STREET
BOCA RATON FL 33486**

Mailing Address
**1320 SW 2ND STREET
BOCA RATON FL 33486**

55053048



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1058339**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMPSON, JOSEPH J
1320 SW 2ND STREET
BOCA RATON FL 33486**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D. THOMPSON, JOSEPH J
1320 SW 2ND STREET
BOCA RATON FL 33486** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D. THOMPSON, SARAH G
1320 SW 2ND STREET
BOCA RATON FL 33486** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED *President*

7/17/03

561-272-2669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (4/03)

Attachment

55053048
#P00000104856

HOFFS INC.
1320 SAW 2 ST
BOCA RATON FL 33486
561-272-2669

JULY 29, 2003


SECOND REQUEST

RE. UNIFORM BUSINESS REPORT
DOCUMENT # P00000104856

TO WHOM IT MAY CONCERN,

PLEASE BE ADVISED THAT I AM THE PRESIDENT OF HOFFS INCORPORATED. MYSELF OR ANYONE ELSE IN THE CORPORATION NEVER RECEIVED THE FIRST NOTICE OF THIS UNIFORM BUSINESS REPORT. THE FIRST NOTICE I HAVE IS THE ONE DUE SEPT 2003. I AM ENCLOSING A CHECK FOR THE \$150.00 AND I AM ASKING THAT THE LATE FEE BE WAIVED. THANK YOU IN ADVANCE FOR YOUR CONSIDERATION

REGARDS,


JOSEPH THOMPSON

PRESIDENT
