

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 04, 2001 8:00 am**  
**Secretary of State**  
 04-04-2001 90007 013 \*\*\*158.75

0006948

**DOCUMENT # P00000115477**

1. Entity Name

**PIRATES DEN ENTERPRISES, INC.**

Principal Place of Business

Mailing Address

**3511 FAIRFAX DR  
 FT LAUDERDALE FL 33312**

**3511 FAIRFAX DR  
 FT LAUDERDALE FL 33312**

2. Principal Place of Business

*Same as above*

3. Mailing Address

*same as above*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

**65-1061734**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**HYSON, STEPHEN  
 3511 FAIRFAX DR  
 FT LAUDERDALE FL 33312**

7. Name and Address of New Registered Agent

Name

*Same*

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

*Stephen Hyson President*

DATE

*3/30/2001*

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

TITLE **SD** ☐ Delete  
 NAME **HYSON, STEPHEN**  
 STREET ADDRESS **3511 FAIRFAX DR**  
 CITY-ST-ZIP **FT LAUDERDALE FL 33312**

TITLE **PD** ☒ Delete  
 NAME **FORAKER, EDWARD**  
 STREET ADDRESS **660 NW 68TH AVE**  
 CITY-ST-ZIP **PLANTATION FL 33317**

TITLE **VD** ☐ Delete  
 NAME **MARRYOTT, WILLIAM**  
 STREET ADDRESS **511 FAIRFAX DR**  
 CITY-ST-ZIP **FT LAUDERDALE FL 33312**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE **Secretary** ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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 like empowered.

SIGNATURE:

*William Marryott* **William Marryott**

Date

*3/30/01* **454 801 7060**

Daytime Phone #

CR2E034 (10/00)