

FILED



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2023 FEB -3 AM 10:11

STATE OF FLORIDA
TALLAHASSEE, FL

1. Corporation Name

Hakim Enterprises, Inc.

Suite, Apt #, etc.

Suite, Apt #, etc

City & State
Clearwater FL

Zip	Country
33762	USA

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida 12/19/2000

5. FEI Number
59-3689577

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED **\$8.75 Additional Fee required for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name
Mary E. Fulton

Street Address (P.O. Box Number is Not Acceptable)
13616 Lake Point Dr. S.

Suite, Apt. #, Etc.

City
Clearwater

State	Zip Code
FL	33762

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Harry J. Lutz REGISTERED AGENT MUST SIGN

Date 01/29/2023

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PN/ST	Mary E. Fulton	13548 Lake Point Dr. S.	Clearwater FL 33762

DECLARATION

2021-2023

C. 3/11/2022

10. E-mail Address: mefulton0926@gmail.com

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE: Mary E. Fulton Mary E. Fulton 01/29/2023 727-424-4552
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #