

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

DOCUMENT # **P01000006845**

1. Entity Name

Hitz, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>407 Lincoln rd</b>	3. Mailing Address <b>407 Lincoln Rd.</b>		
Suite, Apt. #, etc. <b>500</b>	Suite, Apt. #, etc. <b>500</b>		
City & State <b>Miami Beach, FL</b>	City & State <b>Miami Beach</b>		
Zip <b>33139</b>	Country <b>U.S.</b>	Zip <b>33139</b>	Country <b>U.S.</b>

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IN THIS SPACE**

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 

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

January 1: May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.

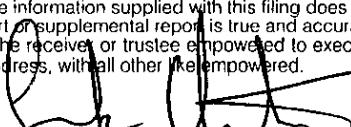
**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Pretta, Frank</b> <b>11002 SW 2S St.</b> <b>MIAMI, FL 33165</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE 

FILED

02 SEP -9 PM 12:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**600007663316--7**  
-09/11/02-01046-020  
\*\*\*\*150.00 \*\*\*\*150.00

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>65-1069802</b>	Applied For <input type="checkbox"/>
	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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7. Name and Address of Current Registered Agent

Name  
**Karen Garcia Mendez**  
Street Address (P.O. Box Number is Not Acceptable)  
**14548 SW 95th Lane**

City <b>MIAMI</b>	FL	Zip Code <b>33186</b>
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CR25024R 14201

*Attachment # P01000006845*

***Brito & Brito Accounting***  
***407 Lincoln Road, Suite 500***  
***Miami Beach, Fl 33139***  
***Corporate Accounting and Business Development***  
***Tel: (305) 534-9292/ Fax: (305) 534-7534***

August 21, 2002

Division of Corporations  
PO Box 1500  
Tallahassee, Fl 32302-1500

Re: Hitz,Inc.  
407 Lincoln Rd.  
suite 500  
Miami Beach, Fl 33139  
P01000006845

Dear Sir or Madam:

Please accept my client's \$150 check he never received the uniform business report. He has been in and out of the country and hadn't received his uniform business report.

Thanking you in advance

Sincerely,

George L. Brito  
Accountant

GB/irp