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FILED
Jun 03, 2002 8:00 am
Secretary of State
05-13-2002 90161 015 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000212003

1. Entity Name
Hilary Hopkins Photography, Inc.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10450 Ashley Oaks Dr	10450 Ashley Oaks Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Riverview FL	City & State: Riverview FL
Zip: 33569 Country: USA	Zip: 33569 Country: USA

4. FEI Number: 59-3712646 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: Derek M. Daniels
Street Address (P.O. Box Number is Not Acceptable): 5102 West Laurel Street
Suite 100
City: Tampa FL Zip Code: 33607

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] DEREK DANIELS 4/25/02
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) X

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	President / Director	TITLE	
NAME	Hilary Hopkins	NAME	
STREET ADDRESS	10450 Ashley Oaks Dr.	STREET ADDRESS	
CITY-ST-ZIP	Riverview, FL 33569	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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: [signature] HILARY HOPKINS 4/24/02 (813) 672-1807
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

34333

Florida Department of State, Division of Corporations

Public Inquiry

Florida Profit

P01000021203

HILARY HOPKINS PHOTOGRAPHY, INC.

[redacted]

PRINCIPAL ADDRESS
10450 ASHLEY OAKS DRIVE
RIVERVIEW FL 33569

MAILING ADDRESS
10450 ASHLEY OAKS DRIVE
RIVERVIEW FL 33569

Document Number	FEI Number	Date Filed
P01000021203	~~NONE~~ 59-3712646	02/26/2001
State	**Status**	**Effective Date**
FL	ACTIVE	NONE

Registered Agent

Name & Address
DANIELS, DEREK M ESQ 3502 HENDERSON BLVD SECOND FLOOR TAMPA FL 33609

Officer/Director Detail

Name & Address	Title
HOPKINS, HILARY 10450 ASHLEY OAKS DRIVE RIVERVIEW FL 33569	D

Annual Reports

Report Year	Filed Date	Intangible Tax

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