

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000076649

1. Entity Name

HI SEVEN FREIGHT FORWARDERS, INC.

Principal Place of Business

2820 NW 72ND AVE  
MIAMI FL 33122  
US

Mailing Address

2820 NW 72ND AVE  
MIAMI FL 33126-1105  
US

2. Principal Place of Business

1617 NW 79TH AVE

3. Mailing Address

1617 NW 79TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-0527558

Applied For

Not Applicable

Zip

33126-1105

Country

USA

Zip

33126-1105

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HIRONO, IZUMI  
2820 NW 72ND AVE  
MIAMI FL 33122

Name

Street Address (P.O. Box Number is Not Acceptable)

1617 NW 79TH AVE

City  
MIAMI

FL

Zip Code  
33126-1105

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) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
D	HIRONO, IZUMI	2820 NW 72ND AVE	MIAMI FL 33122	<input checked="" type="checkbox"/>	D	HIRONO, IZUMI	1617 NW 79TH AVE	MIAMI FL 33126-1105	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IZUMI HIRONO

03/16/2000

Date

(305) 477-5450

Daytime Phone #

CR2E034 (9/99)