

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90201 049 ***150.00

DOCUMENT # P94000088019

1. Entity Name

HOUSE HEALERS, INC.

Principal Place of Business

1805 EAST OKALOOSA AVE.
TAMPA FL 33604

Mailing Address

1805 EAST OKALOOSA AVE.
TAMPA FL 33604

2. Principal Place of Business

13302 Moran Drive

3. Mailing Address

13302 Moran Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33618

Country

Hillsborough

Zip

33618

Country

Hillsborough

4. FEI Number

59-3289160

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAYGOOD, JAMES G

1805 EAST OKALOOSA AVE.
TAMPA FL 33604

Name

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

13302 Moran Drive

City

Tampa

FL

Zip Code

33618

7. Name and Address of New Registered Agent

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	DPST HAYGOOD, JAMES G 1805 EAST OKALOOSA AVE. TAMPA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GONZALEZ, MIGUEL 3002 N ADAMS TAMPA FL 33611	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DIAZ, JOSE 12318 HIDDEN BROOK DRIVE TAMPA FL 33624	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST Haygood, James G. 13302 Moran Drive Tampa, FL 33618	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 REQUIRED

James G. Haygood 4/23/02 (813)908-6701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)