

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

FILED
Apr 23, 2002 8:00 am
Secretary of State

03-13-2002 90106 007 ***150.00

DOCUMENT # P95000001502

1. Entity Name

JAMES HAGEN DISTRIBUTING CO

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1096 Hwy US 1

3. Mailing Address

P.O. Box 730356

Suite, Apt. #, etc.

UNIT 104

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ormond Beach

City & State

Ormond Beach

4. FEI Number

59-3295972

Applied For

Not Applicable

Zip

32174

Country

Volusia

Zip

32173

Country

Volusia

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

7. Name and Address of Current Registered Agent

Name

JAMES HAGEN

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

44 Bay Pointe Drive

City

Ormond Beach FL

Zip Code
32174DO NOT WRITE
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	President JAMES HAGEN 44 Bay Pointe Drive Ormond Beach, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President JAMES E. HAGEN II 44 Bay Pointe Drive Ormond Beach, FL 32174
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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:

James E Hagen

James E HAGEN

February 18, 2002

Date

Daytime Phone #

386-
672-
2259

CR2E034B (12/01)