

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000036046

1. Corporation Name

Hurricane Investment Company Holdings, Inc.

Principal Place of Business

Mailing Address

REINSTATEMENT

3. Date Incorporated or Qualified

3a. Date of Last Report

5/3/1995

4. FBI Number

65-0580370

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under
s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

31 3155 N. 39th Street

26 2435 Hollywood Boulevard

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 Suite 204

City & State

City & State

23 Hollywood FL

28 Hollywood FL

Zip

County

Zip

County

24 33021

25 Broward

29 32020

30 Broward

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Malcolm L. Resnick
3155 N. 39th Street
Hollywood, FL 33021

81 Name

Corporate Creations Network Inc.

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

941 Fourth Street #200

83

84 City
Miami Beach

FL

85 Zip Code
33139

11. Pursuant to the provisions of Sections 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Corporate Creations Network Inc. by Roger A. Reyes, Vice President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP
1 Malcolm L. Resnick
3155 N. 39th Street
Hollywood, FL 33021 ☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 or on attachment with an address.

SIGNATURE

Malcolm L. Resnick, by R.A. Reyes as atty-in-fact

11/22/2000

305-672-0686

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:
Division of Corporations
Fax Number : (850)922-4004

From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (305) 672-0686
Fax Number : (305) 672-9110

CORPORATION REINSTATEMENT

HURRICANE INVESTMENT COMPANY HOLDINGS, INC.

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