

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90103 007 ***150.00

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DOCUMENT # P95000059045

1. Entity Name
HMD DISTRIBUTORS, INC.



Principal Place of Business
**8172 NW 12TH COURT
CORAL SPRINGS FL 33071**

Mailing Address
**8172 NW 12TH COURT
CORAL SPRINGS FL 33071**

2. Principal Place of Business

12626 N.W. 56 Drive
Suite, Apt. #, etc.

3. Mailing Address

12626 N.W. 56 Drive
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Coral Springs FL
Zip **33074** Country **Broward**

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4. FEI Number **65-0600128**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DUBINSKY, HOWARD
8172 NW 12TH COURT
CORAL SPRINGS FL 33071**

7. Name and Address of New Registered Agent

Name **Howard Dubinsky**
Street Address (P.O. Box Number is Not Acceptable) **12626 N.W. 56 Drive**
City **Coral Springs** FL Zip Code **33074**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **X** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUBINSKY, HOWARD 8172 NW 12TH COURT CORAL SPRINGS FL 33071 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Howard Dubinsky 12626 N.W. 56 Drive Coral Springs FL 33074 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X** **Signature Required**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

X APRIL 9, 2003 **242-3966**
Date Daytime Phone #

CR2E034 (10/02)