

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P95000076435**

1. Entity Name

A.H.O.A., INC.

FILED

00 SEP 27 PM 2:10

SECRETARY OF STATE
HUGH A. JONES, JR.
FLORIDA

Principal Place of Business

9355 SOUTHWEST 117TH TERRACE
MIAMI FL 33176

Mailing Address

9355 SOUTHWEST 117TH TERRACE
MIAMI FL 33176

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

105-09234821

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

HICKEY, HAROLD V ESQ.
1570 MADRUGA AVENUE
SUITE 209
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 ☐ DeleteNAME
DAGGETT, WALTER
STREET ADDRESS
9355 SOUTHWEST 117TH TERRACE
CITY-ST-ZIP
MIAMI FL 33176TITLE ☐ DeleteNAME
PETERSON, LINDA D
STREET ADDRESS
9355 SOUTHWEST 117TH TERRACE
CITY-ST-ZIP
MIAMI FL 33176TITLE ☐ DeleteNAME
PETERSON, DREW A
STREET ADDRESS
9355 SOUTHWEST 117TH TERRACE
CITY-ST-ZIP
MIAMI FL 33176TITLE ☐ DeleteNAME
DAGGETT, PRESTON
STREET ADDRESS
9355 SOUTHWEST 117TH TERRACE
CITY-ST-ZIP
MIAMI FL 33176TITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

Preston Daggett

9-15-00

305-232-1516

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone