


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

7/2

FILED
Aug 25, 2003 8:00 am
Secretary of State

07-21-2003 90354 037 ***150.00

DOCUMENT # P95000077615	
1. Entity Name HANA CONSULTING INC.	

Principal Place of Business 15853 REDINGTON DR. REDINGTON BCH. FL 33708	Mailing Address 15853 REDINGTON DR. REDINGTON BCH. FL 33708
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

SCOTT
55054891

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3338305	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DAVIS, MITCHELL G 15853 REDINGTON DRIVE REDINGTON BEACH FL 33708	
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ **DATE** _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, MITCHELL G 15853 REDINGTON DR. REDINGTON BCH. FL 33708 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 reports 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:  **16.03** **727-397-1964**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ **Date** _____ **Daytime Phone** _____

CR2E034 (4/03)

Attachment 55054891
#Pa0000077615

PLEASE DO NOT DISCARD THIS LETTER

I spoke with Tyrone Scott of your office, explained to him that I enclosed a letter previously stating that I never received the first notice for payment of the Uniform Business Report.

Tyrone explained that several letters were seperated from their respective UBRs and to re-submit this letter.

Please call me with any questions... (727) 776-8220.

best regards,

Mitchell Davis
President
Hana Consulting Inc.
