

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 28, 2000 08:00 AM
Secretary of State

DOCUMENT # P95000080415

1. Entity Name
HIDDEN WEALTH, INC.

Principal Place of Business 2915 SW 13TH ST MIAMI 33145 FL US	Mailing Address P O BOX 331041 MIAMI 33233 FL US
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2. Principal Place of Business P O BOX 331041 Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State MIAMI FL	City & State
Zip 33233	Country US

4. FEI Number 65-0642503	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KELLEY CHRISTOPHER P
11098 BISCAYNE BLVD
STE 205
MIAMI 33161 FL US

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 _____ DATE 03/28/2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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	DP	☐ Delete
NAME	R. TUCKER	
STREET ADDRESS	2915 SW 13TH ST	
CITY-ST-ZIP	MIAMI FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	☒ Change ☐ Addition
NAME	R. TUCKER	
STREET ADDRESS	P O BOX 331041	
CITY-ST-ZIP	MIAMI FL 33233	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP		

TITLE		☐ Delete
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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)(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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. Tucker

03/28/2000