

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State
 04-16-2002 90094 021 ***150.00

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DOCUMENT # P97000108516

1. Entity Name
H & H ANTIQUE ENTERPRISES, INC.

Principal Place of Business: **804 LAKE AVE. LAKE WORTH FL 33460**
 Mailing Address: **804 LAKE AVE. LAKE WORTH FL 33460**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

4. FEI Number: **65-0803677**
 Applied For: Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RATFIELD, LOUIS W
7326 LAKE WORTH RD
LAKE WORTH FL 33460

Name: **Roderick C. MOE**
 Street Address (P.O. Box Number is Not Acceptable): **101 North J Street, Suite 2**
 City: **LAKE WORTH** FL Zip Code: **33460**

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: *Roderick C. Moe* **Roderick C. MOE** DATE: **4/6/02**
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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DPT	HANSON, KENNETH G		
804 LAKE AVE.	804 LAKE AVE.		
LAKE WORTH FL 33460	LAKE WORTH FL 33460		
DVS	HANSON, SANDRA M		
804 LAKE AVE.	804 LAKE AVE.		
LAKE WORTH FL 33460	LAKE WORTH FL 33460		

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: *Kenneth G. Hanson* **KENNETH G. HANSON** APRIL 5, 2002 (561) 533-7576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)