

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000019393

1. Entity Name

H & L OF JAX, INC.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90101 029 ***150.00

Principal Place of Business	Mailing Address
8789 SAN JOSE BLVD STE 212 JACKSONVILLE FL 32217	8789 SAN JOSE BLVD STE 212 JACKSONVILLE FL 32217-4260

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	59-3495761	Applied For
		Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
ROTHSTEIN, SIMON D ESQ 4417 BEACH BLVD STE 104 JACKSONVILLE FL 32207

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 \$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	PD
NAME	ANTAR, NICHOLAS
STREET ADDRESS	8789 SAN JOSE BLVD, STE 212
CITY-ST-ZIP	JACKSONVILLE FL 32217
TITLE	VD
NAME	NAMMOUR, NAMMOUR
STREET ADDRESS	8789 SAN JOSE BLVD, STE 212
CITY-ST-ZIP	JACKSONVILLE FL 32217
TITLE	S
NAME	NAMMOUR, CAMELL
STREET ADDRESS	8789 SAN JOSE BLVD, STE 212
CITY-ST-ZIP	JACKSONVILLE FL 32217
TITLE	T
NAME	ANTAR, ROBERT
STREET ADDRESS	8789 SAN JOSE BLVD, STE 212
CITY-ST-ZIP	JACKSONVILLE FL 32217
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NICHOLAS ANTAR Pres.

Date

1/25/2000

Daytime Phone #

904 731-1903

CR2E034 (9/99)