

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
 05-03-2001 91138 016 ***158.75

DOCUMENT # P98000021943

1. Entity Name

HAYDEN LANG, INC.

Principal Place of Business

Mailing Address

P O BOX 030097
 FT LAUDERDALE FL 33303

P O BOX 030097
 FT LAUDERDALE FL 33303

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 **65-0834660**

Applied For
 Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required **\$158.15**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANG, LOUANN H
104 NE 17TH AVE
FT LAUDERDALE FL 33301

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, 2001 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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PVTS
HAYDEN-LANG, LOUANN
104 NE 17TH AVENUE
FT LAUDERDALE FL 33301

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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: *Hayden Lang*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01 (954) 522-1846

Date

Daytime Phone #

CR2E034 (10/00)

attachment
P98000021943
B0046627

DATE: APRIL 30, 2001

FROM: HAYDEN LANG, INC.
POST OFFICE BOX 030310
FORT LAUDERDALE, FLORIDA 33303-0310

TO: FLORIDA SECRETARY OF STATE
DIVISION OF CORPORATIONS
409 EAST GAINES STREET
TALLAHASSEE, FLORIDA 32399

DELIVERY: VIA U.S. POSTAL SERVICE - STANDARD OVERNIGHT -
DELIVERY ON 05-1-01

RE: FILING OF ANNUAL REPORT AND REQUEST FOR A CERTIFICATE OF STATUS

A. The imprinted form - DOCUMENT # P98000021943 - is attached
with the following information:

2. Principal Place of Business:

Post office Box 030310
Fort Lauderdale, Florida 33303-0310
Broward County

2a. Mailing Address:

Post Office Box 030310
Fort Lauderdale, Florida 33303-0310

3. Date Incorporated:

03-09-98

4. FEI Number:

65-0834660

9. Name and Address of Current Registered Agent:

Louann Hayden Lang
104 NE 17th Avenue
Fort Lauderdale, Florida 33301

13. Officers and Directors (which was omitted on the form):

Louann Hayden Lang
104 NE 17th Avenue
Fort Lauderdale, Florida 33301

B. Check in the amount of \$158.75
-for the filing fee and
-for the Certificate of Status