

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 03, 2000 8:00 am
Secretary of State

08-03-2000 90004 023 ***150.00

DOCUMENT # P98000025216

1. Entity Name

HOU DOLLAR PLUS, INC.

Principal Place of Business

8502 N. ARMENIA AVE., STE #2A
TAMPA FL 33604

Mailing Address

8502 N. ARMENIA AVE., STE #2A
TAMPA FL 33604

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

59-3457924

Applied For

Not Applicable

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

HOU, PETER

8502 N. ARMENIA AVE., STE #2A
TAMPA FL 33604

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

D
HOU, PETER
8502 N. ARMENIA AVE.
TAMPA FL 33604

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter Hou

Date

7-20-00

Daytime Phone #

813-931-0211

CR2E034 (5/00)

(attachment 1
Doc# P98000025216)

DO076249

Florida Dept of State
Division of Corp.
P.O. Box 6327

Tallahassee FL 32314

25 July 00

Re: Document # P98000025216

FEI # 59-3497924

Hou's Dollar Plus, Tampa FL 33624

Enclosed please find my check for
\$150.00 Florida Dept of State, being Corporation fee
for the year 2000.

Please also note that I never did
receive the first notice, only this 2nd notice.
It would be appreciated if any consideration
for late fee, if there may be any, be waived.

Thank you once again for your
prompt attention in this matter.

Thank you

Peter Hou

8802 N. Armenia Ave 2A
Tampa FL 33624