

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000063214

1. Entity Name
HONGATE, INC.

Principal Place of Business
2875 NE 191ST STREET SUITE 404
AVENTURA FL 33180

Mailing Address
2875 NE 191ST STREET SUITE 404
AVENTURA FL 33180

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

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

City & State
Zip

Country
Zip

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90131 001 *5,100.00

38270



DO NOT WRITE IN THIS SPACE

4. FEI Number	65-0854111	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

REINHARD, SANFORD N
2875 NE 191ST STREET SUITE 404
AVENTURA FL 33180

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

TITLE PD Delete
NAME GOLDLIST, ISADORE
STREET ADDRESS 12 GOLDFINCH COURT
CITY-ST-ZIP WILLOWDALE ON M2R- 2C3

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President and Secretary Change Addition
NAME Honey Goldlist
STREET ADDRESS 449 Walmer Road, Suite 402
CITY-ST-ZIP Toronto, Ontario M5P 2X9

TITLE VPS Delete
NAME GOLDLIST, HARRY
STREET ADDRESS 12 GOLDFINCH COURT
CITY-ST-ZIP WILLOWDALE ON M2R- 2C3

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
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: *Honey Goldlist*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Honey Goldlist, President and Secretary

Jan. 21/2001

Date

4/6
969-9248

Daytime Phone #

CR2E034 (10/00)