

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Sep 19, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000065539**1. Entity Name
HAMILTON FINANCIAL CORPORATION**Principal Place of Business**

4801 S. UNIVERSITY DRIVE #106

FT. LAUDERDALE
33328

FL

Mailing Address

4801 S. UNIVERSITY DRIVE #106

FT. LAUDERDALE
33328

FL

2. Principal Place of Business

9664 PINES BLVD

3. Mailing Address

9664 PINES BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PEMBROKE PINES

FL

City & State

PEMBROKE PINES

FL

Zip
33024Country
USZip
33024Country
US**4. FEI Number****65-0853214**

Applied For

Not Applicable

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****HAMILTON LATONYA**
17517 SW 28TH CT.**MIRAMAR**
33029

FL

US

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)

09/19/2001

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	P	☐ Delete
NAME	HAMILTON LATONYA	
STREET ADDRESS	17517 S.W. 28TH COURT	
CITY-ST-ZIP	MIRAMAR FL 33029	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Change ☐ Addition
NAME	HAMILTON LATONYA M	
STREET ADDRESS	17517 S.W. 28TH COURT	
CITY-ST-ZIP	MIRAMAR FL 33029	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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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: LATONYA M HAMILTON

P

09/19/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)