..000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 06, 2000 8:00 am
Secretary of State
06-06-2000 90011 016 ***150.00

..CUMENT # P98000068399

..., Name
HENDRICKS YACHT REFINISHING, INC.

...al Place of Business	Mailing Address
2316 NW 14TH STREET	2316 NW 14TH STREET
...T LAUDERDALE, FL 33311	FORT LAUDERDALE, FL 33311

[redacted]

DO NOT WRITE IN THIS SPACE

...incipal Place of Business	3. Mailing Address
...te, Apt. #, etc.	Suite, Apt. #, etc.
...ty & State	City & State
... Country	Zip Country

4. FEI Number 65-0855612 ☐ 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
Name NOFIL & NOFIL, P.A.
Street Address (P.O. Box Number is Not Acceptable) 3284 NORTH STATE ROAD 7
City LAUDERDALE LAKES FL Zip Code 33319

..he above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

...ATURE [signature] 4/30/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

..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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PSTD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PHILLIP, HENDRICKS	NAME	
STREET ADDRESS	2316 NW 14TH STREET	STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (9/99)

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.

..IGNATURE: Hendricks Phillip