

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90816 001 \*\*\*150.00

**DOCUMENT # P98000080390**

1. Entity Name  
**DR. HOOK'S LURES, INC.**



Principal Place of Business  
**300 HIGH RIDGE RD  
BAY #2  
BOYNTON BEACH FL 33426**

Mailing Address  
**300 HIGH RIDGE RD  
BAY #2  
BOYNTON BEACH FL 33426**



2. Principal Place of Business  
**3000 High Ridge Rd.**

3. Mailing Address  
**3000 High Ridge Rd.**

Suite, Apt. #, etc.  
**Bay #2**

Suite, Apt. #, etc.  
**Bay #2**

City & State  
**Boynton Beach, FL**

City & State  
**Boynton Beach, FL**

Zip Country  
**33426 USA**

Zip Country  
**33426 USA**

4. FEI Number **65-0864245**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**PAPATHEODOROU, ANDREAS  
1200 S FEDERAL HIGHWAY  
SUITE 202  
BOYNTON BEACH FL 33425**

## 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	<b>VTD HALL, MARK</b>	<b>1200 S. FEDERAL HIGHWAY #202</b>	<b>BOYNTON BEACH FL 33435</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<b>VTD PAPATHEODOROU, ANDREAS C</b>	<b>1200 S. FEDERAL HIGHWAY #202</b>	<b>BOYNTON BEACH FL 33435</b>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Andreas Papathodorou 4/15/03 561-634-0483**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)