UNIFORM BUSINESS REPORT (UBR)

1 OF 2

DOCUMENT # P98000083068

1. Entity Name
HURRICANE LEAKS, INC.

FILED
00 AUG 24 AM 10:49
SECRETARY OF STATE

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
395 N ROYAL POINCIANA BLVD. MIAMI SPRINGS FL 33166	395 N ROYAL POINCIANA BLVD. MIAMI SPRINGS FL 33166

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 65-0871325 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $ 30.00 Additional Required

6. Name and Address of Current Registered Agent

HEALEY, JOSEPH E
397 N ROYAL POINCIANA BLVD.
MIAMI SPRINGS FL 33166

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 _____ DATE
Signature, typed or printed name of registered agent and title if officer below (NOTE: Registered Agent signature required when submitting)

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 fee will be $700.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fee

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEALEY, JOSEPH E 397 N ROYAL POINCIANA BLVD. MIAMI SPRINGS FL 33166	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEALEY, LINDA E 397 N ROYAL POINCIANA BLVD. MIAMI SPRINGS FL 33166	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Joseph E. Healey
Date
Electronic Signature of SIGNING OFFICER OR DIRECTOR
Typed or Printed Name of SIGNING OFFICER OR DIRECTOR

FOR DIVISION USE ONLY

KE

LORETTA FABRICANT C.P.A. P.A.

◇

2052

August 21, 2000

Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Hurricane Steaks, Inc.
Ref # P98000083068

To Whom It May Concern:

I am requesting the removal of $400 on my client's account. I called your offices about 1 month ago and told the representative that my client did not receive the first notice for the uniform business report. I was told to enclose a letter and to send $150 with the second notice. I did just that and my client received your notice dated August 11th asking for the $400.

I called today and the representative said that the letter was lost and to do another. I enclose a copy of the UBR that you sent back to my client. My client stated that you did not return his original.

Please review my client's account and remove the $400 as a one-time courtesy.
If you have any questions or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,

Stacy Sand, CPA

Enclosure

cc: Joe & Linda Healey

100 SOUTHEAST SECOND STREET. SUITE 3910. MIAMI, FLORIDA 33131. TELEPHONE (305) 371-2830. FACSIMILE (305) 358-3968