

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P98000088416

1. Entity Name

HYGIAFORM USA, INC.

FILED

00 SEP 12 PM 3:02

Principal Place of Business
3333 Duck Avenue
Unit 104A
Key West, FL 33040

Mailing Address
the same

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
1501 Northwest 12 Avenue
Suite, Apt. #, etc.

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

City & State
Pompano Beach, FL
Zip
33060

City & State

Zip

Country

4. FEI Number

Applied For
☒ (Not Applicable)

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Spiegel & Utrera, P.A.
343 Almeria Avenue
Coral Gables, FL 33134

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's signature required when re-statuting)

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, 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

11.

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

PSD
Amár, Haim
1501 Northwest 12 Avenue
Pompano Beach, FL 33060

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

VTD
Amar, Michael
1501 Northwest 12 Avenue
Pompano Beach, FL 33060

☒ Delete

TITLE

NAME

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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 an other like empowered.

SIGNATURE:

Haim Amar

Haim Amar

9-11-2000

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AFFIDAVIT IN SUPPORT OF
REQUEST TO WAIVE THE
FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA)
)
COUNTY OF MIAMI-DADE)

1. Haim Amar is the President of HYGIAFORM USA, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation failed to file its 2000 Uniform Business Report or pay the 2000 Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 2.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment by the Corporation of its 2000 Uniform Business Report filing fee, which are presented simultaneously with this Affidavit.
4. HYGIAFORM USA, INC. satisfies the requirements of the Florida Statutes 607.0401.

Dated: 11 day of September, 2000

FURTHER, AFFIANT SAYETH NOT

HYGIAFORM USA, INC.

By: 
Haim Amar, President

SWORN AND SUBSCRIBED
before me this 11 day of September, 2000.

Notary Public, State of Florida at Large

Printed Name:

Commission Expires:

