## **2000 UNIFORM BUSINESS REPORT (UBR)** FILED DOCUMENT # **P98000104763** Mar 06, 2000 8:00 am **Secretary of State** HAGGAR CONSULTING, CORP. 03-06-2000 90063 021 \*\*\*150.00 Principal Place of Business Mailing Address 10328 BOCA ENTRADA BLVD., #106 10328 BOCA ENTRADA BLVD.. #106 **BOCA RATON FL 33428-5802** BOCA RATON FL 33428 2. Principal Place of Business 3. Mailing Address O W.J. TREMBLAY P.A. 10282 BOGA ENTRADA BLVD. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. # 123 4. FEI Number Applied For 65-0881881 BEACH Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent W.J. TREMBLAY, P.A. HAGGAR, FRANK 10328 BOCA ENTRADA BLVD., #106 BOCA RATON FL 33428 Delray the purpose of changing its registered office or registered agent, or both, in the State of Florida. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1; 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution Make Check Payable to Department of State -(See criteria on-back)-ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PSTD TITLE TITI F □ Delete HAGGAR, FRANK NAME 10282 BOGA ENTRADA BLVD. #123 STREET ADDRESS 10328 BOCA ENTRADA BLVD., #106 STREET ADDRESS BOCA NATON, FL. 33428 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delute -TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change Addition ☐ Defete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if n address, with all omer like empowered changed, or on an attachment with