## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P9900001051 Jul 21, 2000 8:00 am **Secrétary of State** HIP VENTURES, INC. 07-21-2000 90160 014 \*\*\*150.00 Principal Place of Busine Mailing Address 107 12 STREET SW-107 12 STREET SW RUSKIN FL 33570 RUSKIN FL 33570 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State Not Applicable Zip 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 Name-NYMARK, DENNIS V Street Address (P.O. Box Number is Not Acceptable) 110 S PEBBLE BEACH BLVD SUN CITY CENTER FL 33573 Zip Code 8. The abo amed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATUFE nature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This c ion is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be irement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 ig red Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ?TD ☐ Addition TITLE TITLE ☐ Delete ANNER, JAMES R NAME NAME 07 12 STREET SW STREET ADDRESS STREET ADDRESS USKIN FL 33570 CITY-ST-ZIP CITY-ST-7IP Addition Change TITLE ☐ Delete TITLE ANNER, MARCIA J NAME NAME 17 12 STREET SW STREET ADDRESS STREET ADDRI RVISKIN FL 33570 CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition GRIST, LORENE E NAME NAME S PEBBE BCH BLVD STREET ADDRESS STREET ADDR CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE Change Addition NAME STREET ADDRE STREET ADDRESS CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRES CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME

13. I hereby partil 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 the last port 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 color of 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 of an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

GONDAN REDAMES R. TANKER 7/3/00 (813) GUS-463 SIGNING OFFICER OR DIRECTOR

CR2E034 (5/00)

HIP Ventures Inc. 107 12<sup>th</sup> Street SW Ruskin, FL 33570

July 13, 2000

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

Ref: 2000 Uniform Business Report

Dear Sir or Madam:

This letter serves to inform you that we have never received a notice regarding the \$150.00 filing fee for HIP Ventures, Inc.

We respectfully request that the \$550.00 penalty be waived.

mes K. Janner

Sincerely,

ames R. Tanner

Notary >

Encl: Check for \$150.00

Lorene E. Siegrist
MY COMMISSION # CC723704 EXPIRES
June 30, 2002
BONDED THRU TROY FAIN INSURANCE, INC.