

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1 of 3

7/28/2005-90002-012-\$150.00-\$150.00

DOCUMENT # P99000041895

1. Entity Name

HEARTBREAKERS II, INC.



Principal Place of Business

13120 116TH ST. NORTH
LARGO FL 33778

Mailing Address

13120 116TH ST. NORTH
LARGO FL 33778

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

1st MOORE

CR2E034 (10/04)

25



Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUNT, TERRY M.
13120 116TH ST. NORTH
LARGO FL 33778

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 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	D	☐ Delete
NAME	HUNT, TERRY M	
STREET ADDRESS	13120 116TH ST. NORTH	
CITY-ST-ZIP	LARGO FL 33778	
TITLE	D	☐ Delete
NAME	HUNT, PAMELA A	
STREET ADDRESS	13120 116TH ST. NORTH	
CITY-ST-ZIP	LARGO FL 33778	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME	900060216479	
STREET ADDRESS	10/04/05--01060--015	
CITY-ST-ZIP	**558.75	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Terry M Hunt Terry M Hunt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-23-05

Date

727-585-3071

Daytime Phone

TO WHOM IT MAY CONCERN
REASON FOR THIS TAKING SO
LONG IS MY WIFE FAMELA A
HUNT IS GOING THROUGH
CANCER TREATMENTS AS I
WRITE THIS NOTE, THIS
IS HER 2ND TIME AROUND
WITH LYMPHOMA (CANCER)
I DO NOT ALWAYS GET
ALL THE MAIL AS I
COMMERCIAL FISH FOR A
LIVING I'M GONE 8-10 DAYS
AT A TIME THERE IS NO ONE
TO HELP MY WIFE WHILE
SHE IS ALONE DURING THIS
TIME. SO SOMETIMES THE
MAIL GETS DISPLACED
THE CHEMO TREATMENTS
HAVE MESSED WITH HER
MEMORY FACTOR. I'M NOT
ASKING FOR ANY FAVORS
I JUST HAVE BEEN TRYING

30f3

TO TAKE CARE OF MY
WIFE, WHO MATTERS TO
ME GREATLY I'LL TRY TO
NOT LET THIS PROBLEM
HAPPEN AGAIN

THANK YOU
TERRY M HUNT
Terry M Hunt
9-30-05