

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90018 027 ***150.00

DOCUMENT # P99000072506

1. Entity Name

HYPERBYTE.COM, INCORPORATED

Principal Place of Business

Mailing Address

691 GENEVA PLACE
TAMPA FL 33606

691 GENEVA PLACE
TAMPA FL 33606-3923

2. Principal Place of Business

3. Mailing Address

101 E. KENNEDY BLVD.

101 E. KENNEDY BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

300

300

City & State

City & State

TAMPA, FL

TAMPA, FL

Zip

Country

Zip

Country

33602

USA

33602

USA

4. FEI Number

59-3596376

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

LOWRY, WILLIAM L
691 GENEVA PLACE
TAMPA FL 33606

Name

Street Address (P.O. Box Number is Not Acceptable)

101 W. BEACH PLACE, APT. 210

City

TAMPA,

FL

Zip Code

33606

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

William Lowry
WILLIAM L. LOWRY

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

April 25, 2000

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	D	<input type="checkbox"/> Delete
NAME	LOWRY, WILLIAM L	
STREET ADDRESS	691 GENEVA PLACE	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE	SD	<input type="checkbox"/> Delete
NAME	HALL, THOMAS A II	
STREET ADDRESS	148 PINEHILL RD.	
CITY-ST-ZIP	DUBLIN GA 33606	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ERNST, DOUGLAS J	
STREET ADDRESS	1007 N. FEDERAL HWY., BOX 69	
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

William Lowry
WILLIAM L. LOWRY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 2000

Date

813-472-7300

Daytime Phone #

4-34 (9/99)