

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 999000076041

1. Entity Name

HYPERLUMINAL TECHNOLOGY CONSULTANTS, INC.

FILED

02 MAY 31 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15102 S.W. 104TH STREET

Suite, Apt. #, etc.

812

3. Mailing Address

Suite, Apt. #, etc.

812

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

4. FEI Number

65-0946415

Applied For

Not Applicable

Zip

33196

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

BILGE FISHER

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

15102 S.W. 104TH STREET #812

City

MIAMI

FL

Zip Code
33196

**DO NOT WRITE
IN THIS SPACE**

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 signature required when reinstating)

DATE

5/23/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00.
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D BILGE FISHER 15102 S.W. 104TH STREET #812 MIAMI, FL 33196
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	300005763883--2 -06/12/02--01077--014 ****450.00 ****450.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	351.25 - AR 10.00 - ARARTS 88.75 - ARSUPP

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/02

Date

(305) 382-6833

Daytime Phone #

CR2E034B (12/01)

Attachment

Doc # 999 006076041

May 23, 2002

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Hyperluminal Technology Consultants, Inc.
EIN: 65-0946415

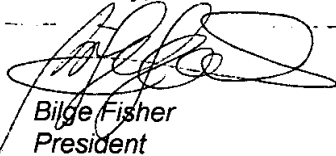
Dear Sir or Madam:

Enclosed herein please find a copy of the UBR for 2002, along with my payment in the amount of \$450.00, which covers the filing fees for 2000, 2001 and 2002.

Please be advised, I moved at the end of 1999 and did not receive the initial UBR filing form and was unaware of this requirement until I was notified I had an inactive corporation.

Please process my check and reinstate my corporation effective immediately. I apologize for this oversight and have taken steps to ensure it does not happen again.

Sincerely,



Bilge Fisher
President

ENCLOSURE
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

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