

2000 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 15, 2000 8:00 am
Secretary of State

04-17-2000 90056 046 ***150.00

DOCUMENT # **P99000092130**
 Entity Name **FOX & THE HEN ANTIQUES, INC.**

Principal Place of Business Mailing Address

Principal Place of Business **4600 W KENNEDY BLVD.** 3. Mailing Address **622 SO. MACDILL AVE**
 Suite, Apt. #, etc., Suite, Apt. #, etc.

City & State **TAMPA FL.** City & State **TAMPA FL**
 Zip **33609** Country **Hillsborough** Zip **33609** Country **Hillsborough**

4. FEI Number **59-3611541** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
SALM, ALBERT M. III ESQ
4600 W. KENNEDY BLVD.
TAMPA, FL 33609

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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: Beverly B. Hendershot DATE: 7 April 00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

DP Beverly B. Hendershot <input type="checkbox"/> Delete 819 WEST FRIBLEY STREET TAMPA FL. 33603
DST Randall D. FOX <input type="checkbox"/> Delete 3116 W BOY VILLA DR TAMPA FL 33611
<input type="checkbox"/> Delete
<input type="checkbox"/> Delete
<input type="checkbox"/> Delete
<input type="checkbox"/> Delete
<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

DVP IRVING R. HENDERSHOT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 819 WEST FRIBLEY ST TAMPA FL 33603
<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Beverly B. Hendershot DATE: 7 April 00 813-879-5400
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/99)