

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000093068

1. Entity Name  
HITM, INC.

**FILED**  
**Jul 20, 2000 8:00 am**  
**Secretary of State**

07-20-2000 90013 005 \*\*\*550.00

Principal Place of Business  
6601 PARK OF COMMERCE BLVD.  
BOCA RATON FL 33487

Mailing Address  
6601 PARK OF COMMERCE BLVD.  
BOCA RATON FL 33487

2. Principal Place of Business

3. Mailing Address  
AHEARN JASCO + COMPANY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

190 S.E. 19TH AVE

City & State

City & State  
POMPANO BEACH, FL

Zip

Country

Zip  
33060

Country  
USA

4. FEI Number

65-0964619

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MILLER, ALISON W  
2200 MUSEUM TOWER  
150 WEST FLAGLER STREET  
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name  
FRANK JAUMOT

Street Address (P.O. Box Number is Not Acceptable)  
AHEARN JASCO + COMPANY

190 S.E. 19TH AVE

City  
POMPANO BEACH

FL

Zip Code  
33060

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]*

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

(NOTE: Registered Agent signature required when reinstating)

7/11/00

DATE

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DIRECTOR  
HANK ASHER  
6601 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
KAREN KLING  
6601 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
THOMAS J. QUARLES  
6601 PARK OF COMMERCE  
BOCA RATON, FL 33487 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]*

7-11-00

Date

561-573-0712

Daytime Phone #

CR: 15704-0-0000