

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90868 005 ***150.00

DOCUMENT # S21380

1. Entity Name
H & N SERVICES, INC.

Principal Place of Business

18761 WEST DIXIE HIGHWAY
102
MIAMI FL 33180
US

Mailing Address

16100 N.E. 16TH AVENUE
C/O HMO. SUITE B HMO
NORTH MIAMI BEACH FL 33162
US



2. Principal Place of Business

3020 MARCOS AVE

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0237078

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NUCCITELLI, JUDITH A
18761 WEST DIXIE HIGHWAY
201
MIAMI FL 33180

7. Name and Address of New Registered Agent

Name

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

3020 MARCOS DR. #203

City

Aventura, FLA.

FL

Zip Code

33160

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

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, 2002 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

TITLE **PST** ☐ Delete
NAME **NUCCITELLI, JUDITH A**
STREET ADDRESS **18761 WEST DIXIE HIGHWAY #102**
CITY-ST-ZIP **MIAMI FL 33180**

TITLE **VP** ☐ Delete
NAME **HOBBS, HOWARD M**
STREET ADDRESS **18761 WEST DIXIE HIGHWAY #102**
CITY-ST-ZIP **MIAMI FL 33180**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3020 MARCOS DR 203**
CITY-ST-ZIP **Aventura FL 33160**

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

HOWARD M. HOBBS

4/29/02

305 345-4888

CR2E034 (9/01)