

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S76798

1. Entity Name

HRJ INDUSTRIES, INC.

FILED
Sep 13, 2000 8:00 am
Secretary of State

09-13-2000 90045 034 ***558.75

Principal Place of Business

Mailing Address

~~404 WASHINGTON AVE N~~

~~4737 HWY 101~~

~~SUITE 300~~

~~STE 300~~

~~MINNEAPOLIS MN 55401~~

~~MINNETONKA MN 55345~~

~~US~~

~~US~~

2. Principal Place of Business

615 North Tarragona Str

3. Mailing Address

615 North Tarragona Str

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola, Florida

City & State

Pensacola, Florida

4. FEI Number

59-3081596

Applied For

Not Applicable

Zip

32501

Country

USA

Zip

32501

Country

USA

5. Certificate of Status Desired

☒ X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOGAN, TIM
4127 MADURA ROAD
GULF BREEZE FL 32561

Name

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

City

FL

Zip Code

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~P~~ ☐ Delete
NAME JOSEPH, HOGARTH R.
STREET ADDRESS ~~28065 BOULDER BRIDGE DR~~
CITY-ST-ZIP ~~SHOREWOOD MN~~

TITLE P ☒ Change ☐ Addition
NAME Joseph, Hogarth R.
STREET ADDRESS 536 East Government Street, #2
CITY-ST-ZIP Pensacola, Florida 32501

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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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: Hogarth, Roy Joseph
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/2000

Date

850.439.1465

Daytime Phone #

CR2E034 (5/00)