

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90191 005 ***158.75

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DO NOT WRITE IN THIS SPACE

DOCUMENT # 598685

1. Entity Name
 MYHAL, INCORPORATED

Principal Place of Business
 1960 UNION ST
 UNIT 23
 Clearwater, FL 33763

Mailing Address
 1960 UNION ST
 UNIT 23
 Clearwater, FL 33763

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number
 59-3093269

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 Fairman, Harold
 1960 UNION ST
 UNIT 23
 Clearwater, FL 33763

7. Name and Address of New Registered Agent
 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 \$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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS CITY-ST-ZIP
	D Lunt, Leigh	1504 Palmetto Ave S Sanford, FL 32771			
	D Fairman, Harold	1960 Union St # 23 Clearwater, FL 33763			

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: Harold Fairman Harold Fairman 4/19/00 727-733-3346

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)