

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90016 011 ***150.00

DOCUMENT # V08886

1. Entity Name
L & H SILKSCREEN SPECIALTIES, INC.

Principal Place of Business
**4771 SOUTHWEST 70TH TERRACE
 DAVIE FL 33314
 US**

Mailing Address
**C/O GRUBER AND ASSOCIATES, P.A.
 1650 SOUTHEAST 17TH STREET STE 301
 FORT LAUDERDALE FL 33316-1735
 US**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
do Gruber
 Suite, Apt. #, etc.
SUITE 301

City & State
FORT

4. FEI Number **65-0284055** 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
**HODGE, MICHAEL T.
 4771 SOUTHWEST 70TH TERRACE
 DAVIE FL 33314**

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 _____ (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. **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	DPST HODGE, MICHAEL T. 4771 SOUTHWEST 70TH TERRACE DAVIE FL 33314	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: MICHAEL T. HODGE MICHAEL T. HODGE 2/10/00 954-522-2222
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)