

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V21573
1. Entity Name HOOD DEPOT, INC

Principal Place of Business **Mailing Address**
 808 TIVOLI CIRCLE, UNIT 205
 DEERFIELD BEACH, FL 33441

2. Principal Place of Business **3. Mailing Address**
 1360 SW 32nd WAY 1360 SW 32nd WAY
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 DEERFIELD BEACH, FL DEERFIELD BEACH, FL
Zip **Country** **Zip** **Country**
 33442 33442

6. Name and Address of Current Registered Agent
 MICHAEL LUBOWICKI
 808 TIVOLI CIRCLE, UNIT 205
 DEERFIELD BEACH, FL 33441

4. FEI Number 65-0405613
Applied For **Not Applicable**
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
Name MICHAEL LUBOWICKI
Street Address (P.O. Box Number is Not Acceptable)
 3401 NW 71st Street
City COCONUT CREEK **FL** **Zip Code** 33073

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 *Michael Lubowicki* **DATE** 11/1/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reappointing)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐ **FILE RETURN PER IS 61000**
(See criteria on back) After MAY 1, 2001 Fee will be \$350.00 State 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 PRESIDENT ☐ Delete	TITLE ☐ Change ☐ Addition	NAME MICHAEL LUBOWICKI	NAME 100004739841--E
STREET ADDRESS 1360 SW 32 nd WAY	STREET ADDRESS -12/26/01--01096--009	CITY-ST-ZIP DEERFIELD BCH, FL 33442	CITY-ST-ZIP *****125.00 *****125.00
TITLE ☐ Delete	TITLE ☐ Change ☐ Addition	NAME	NAME 100004739841--E
STREET ADDRESS	STREET ADDRESS -12/26/01--01096--010	CITY-ST-ZIP	CITY-ST-ZIP *****25.00 *****25.00
TITLE ☐ Delete	TITLE ☐ Change ☐ Addition	NAME	NAME
STREET ADDRESS	STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP
TITLE ☐ Delete	TITLE ☐ Change ☐ Addition	NAME	NAME
STREET ADDRESS	STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP
TITLE ☐ Delete	TITLE ☐ Change ☐ Addition	NAME	NAME
STREET ADDRESS	STREET ADDRESS	CITY-ST-ZIP	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)(b), 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 Lubowicki* **DATE:** 11/1/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATION
 01 DEC 14 PM 1:59

DO NOT WRITE IN THIS SPACE

CR2ED34 (11/00)



Friday, November 02, 2001

Department of State
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: FEI Number 65-0405613

We did not receive the 2001 Uniform Business Report. Likewise we did not file the report by the due date.

We have attached a form that has been downloaded along with a check for the filing fee.

Please feel free to contact us if needed.

Sincerely,

A handwritten signature in cursive script, appearing to read "Sandi Vargas", is written over the word "Sincerely,".

Sandi Vargas