## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F0000003014  1. Entity Name  JIRREH, INC.						Apr 18, 2002 8:00 am Secretary of State 04-18-2002 90357 034 ***150.00				
		فتلتله 4 بيوسر								
Principal Place of Business Mailing Address										
1831 NE 38TH ST #609 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308						04044XXX				
	İ									
2. Principal F	lace of Business	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat	e e	City & State			4.	FE! Number <b>75-2662134</b>		pplied For ot Applicable		
Zip	Country	Zip	Cour	itry	5.		8.75 Add	ditional		
	6. Name and Address of Current I	Registered Agent			7. 1	Name and Address of New Registered A	<del>'</del>	,,,	Ⅎ	
		ಪ್ರತಿಪಡೆಯ ಸಂಗಾರ್ಥ ಪಡೆಗಳ ಪಡೆದಿಗಳು	(ಇರ್ಥಾಭಾರ್ಷ ಭಾರತಿಸುತ್ತಾರೆಯ ಕ್ರಾಡಿಕ್		Name					
WINKLER, 1831 NE	¦ Alan j 38th St., #609			Street Address (P.O. Box Number is Not Acceptable)					]	
FT. LAUD	ERDALE FL 33308								١	
	<u> </u>			City		, FL	Zip Cod	le	7	
8. The above	named entity submits this statement for	the purpose of changing its	egister	ed office or regis	stered ag	gent, or both, in the State of Florida.	<u> </u>		1	
SIGNATURE .	  -   Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registere	d Agent signature requ	uired when re	reinstating) DATE			>	
9 This corpo	ination is eligible to satisfy its Intangible	FILE NOW!							$\dashv$	
Tax filing t	equirement and elects to do so.	After May 1, 200	2 Fee	will be \$550.0		10. Election Campaign Financing Trust Fund Contribution.		May Be		
	ia on back) to	Make Check Payab		epartment of S					╛	
TITLE	S OFFICERS AND I	DIRECTORS Delete	12.	. 1	AD	DDITIONS/CHANGES TO OFFICERS AND	DIRECTOR:	S IN 11	╣.	
NAME	WINKLER, VICKI S	C Delete	NAM				Onlings	Addition		
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STREET ADDRESS	WINKLER, ALAN J 1831 NE 38TH ST., #609			ET ADDRESS					ĺ	
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NAME			NAM							
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NAME		<b>122</b> 001010	NAM	ı					-	
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP			╂	-ST-ZIP					4	
TITLE NAME		☐ Delete	TITLE	1			☐ Change	☐ Addition		
STREET ADDRESS			•	ET ADDRESS						
CITY-ST-ZIP			CITY-	ST-ZIP						
TITLE	1	☐ Delete	TITLE	ŀ			Change	☐ Addition		
NAME STREET ADDRESS	I		NAM8 STREE	ET ADDRESS					•	
CITY-ST-ZIP	! I			ST-ZIP					-	
indicated of the core	on this report or supplemental report is t	rue and accurate and that my vered to execute this report a	z sionat	ure shall have th	ie same l	119.07(3)(i), Florida Statutes. I further certif legal effect as if made under oath; that I an da Statutes; and that my name appears in	an officer	or director		

SIGNATURE: 1