CR2E034 (9/01

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 24, 2002 8:00 am P95000026024 DOCUMENT # **Secretary of State** 1. Entity Name 02-24-2002 90094 045 ***150.00 JORDAN'S, INC. Principal Place of Business Mailing Address 13727 S.W. 152ND ST. 13727 S.W. 152ND ST. MIAMI FL 33177-1106 MIAMI FL 33177-1106 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0572209 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JORDAN, DEBORAH L Street Address (P.O. Box Number is Not Acceptable) 13727 S.W. 152ND ST., #101 MIAMI FL 33177-1106 City 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) Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME JORDAN, DEBORAH L NAME STREET ADDRESS 13727 S.W. 152ND ST., #101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE Change ☐ Addition TITS F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 supplied with this hind does not quality for the exemption stated in decider 19.07(3)(). Florida Statutes, indirect error that I am an officer or director of the corporation or the receiver or postee 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 a address, with all other like empowered. changed, or on an attachment with

SIGNATURE: