## 2001 UNIFORM BUSINESS REPORT (UBR)

## May 15, 2001 8:00 am Secretary of State **DOCUMENT # 397657** 1. Entity Name 05-15-2001 90013 030 \*\*\*150.00 MICHAEL HANNAU ENTERPRISES, INC. Principal Place of Business Mailing Address 3800 NW 32 AVENUE 3800 NW 32 AVENUE MIAMI FL 33142 MIAMI FL 33142 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1387092 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HANNAU, MICHAEL P. Street Address (P.O. Box Number is Not Acceptable) 315 EAST DILIDO DRIVE MIAMI BEACH FL 33139 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) Change ☐ Addition TITLE ☐ Delete TITI F YANNAU, MICHARL P HANNAU, MICHAEL P. NAME NAME 315 E. DILLOS DRIVE 315 EAST DILIDO DRIVE STREET ADDRESS STREET ADDRESS MIAMI BRACH, FL 3313 CITY-ST-ZIP CITY-ST-7IP MIAMI BEACH FL ☐ Addition ☐ Chance STD ☐ Delete TITLE TITLE HANNAU, NATALIE M. NAME STREET ADDRESS 315 EAST DILIDO DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL Addition ٧P . Delete TITLE TITLE. HANNAN, ROBERT W NAME NAME STREET ADDRESS 813 NE 97TH STREET STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33138 Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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SIGNATURE: Natale Hannau Natale Hannau 43001 305- BB 1107

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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

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changed, or on an attachment with an address, with all other like empowered