2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 464399** May 11, 2000 8:00 am Secretary of State JANET, INC. 05-11-2000 90317 003 ***150.00 Principal Place of Business Mailing Address 730 WINTERBROOKE WAY 3830 SR 674 SUN CITY CENTER FL 33573-6963 RUSKIN FL 33570 3. Mailing Address 2. Principal Place of Business 801 COTTAGE HILL WAY DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 59-1560621 Not Applicable \$8.75 Additional Zip Country Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BANK, MARTIN Street Address (R.O. Box Number is Not Acceptable) -730 WINTERBROOKE-WAY--- SUN-CITY-CENTER FL 33573 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 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. MARTIN BANK TITLE Delete BANK, MARTIN NAME 801 COTTAGE HILL WAY NAME STREET ADDRESS 730 WINTERBROOKE WAY STREET ADDRESS BRANDON, FL. 33511 CITY-ST-7IP CITY-ST-ZIP SUN CITY CENTER FL Change 2 ☐ Addition TANAT BANK ☐ Delete TITLE TITLE 80) COTTAGE HILL WAY BANK, JANET NAME 730 WINTERBROOKE WAY STREET ADDRESS STREET ADDRESS PANDON, FL. 33511 CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Delete TITLE ☐ Change 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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytone Phone