FILED

2002 Uniform Business Report (UBR)

Apr 09, 2002 8:00 am Secretary of State DOCUMENT # 521092 1. Entity Name FARHAT INDUSTRIES, INC. 04-09-2002 90046 047 ***150.00 Principal Place of Business Mailing Address 8774 NORMANDY BLVD. 8774 NORMANDY BLVD. JACKSONVILLE FL 32221 JACKSONVILLE FL 32221 =2.-Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1716522 Not Applicable Zip Country Zip Country \$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 FARHAT, JOHN Street Address (P.O. Box Number is Not Acceptable) 8774 NORMANDY BLVD. JACKSONVILLE FL 32221 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 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 • This corporation is eligible to satisfy its intangible = 10. Election Gampaign 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. 12. TITLE PD TITLE ☐ Change Addition CR2E034 (9/01 ☐ Delete NAME FARHAT, JOHN NAME 8774 NORMANDY BLVD. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME FARHAT, JEANETTE Z. NAME STREET ADDRESS 8774 NORMANDY BLVD. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP ☐ Change ☐ Addition TITI E Delete FARHAT, ABIE NAME STREET ADDRESS 8774 NORMANDY BLVD STREET ADDRESS CITY-ST-ZIP Jacksonville FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FARHAT, JOHN NAME 8774 NORMANDY BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Jacksonville FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE 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)(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

Afric Farhat 3-22.02

changed, or on an attachment