2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F00000003978 **DOCUMENT #**

1. Entity Name

HANNOUSH JEWELERS, INC.



FILED Jan 27, 2003 8:00 am Secretary of State 01-27-2003 90201 028 ***150.00

							III.					
Principal Place of Business 134 CAPITAL DRIVE WEST SPRINGFIELD MA 01089			Mailing Address 134 CAPITAL DRIVE WEST SPRINGFIELD MA 01089									
2. Principal Place of Business				3. Mailing Address					!			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES					
City & State			City & State					4. FEI Number 04-2706327 Applied For Not Applicable				
Zip Country		Zip		Coun	Country		5. C	ertificate of Status Desired		8.75 Add	ditional	
6. Name and Address of Current I				Registered Agent -			7. Name and Address of New Registered Agent					
						Name						
ZACHODNY, JOHN 8201 SOUTH TAMIAMI TRAIL						Street Address (P.O. Box Number is Not Acceptable)						
SARASOTA SQUARE MALL									<u> </u>			
SARASOTA FL 34238							City			FL	Zip Cod	e
 The above named entity submits this statement for the purpose of changing its registered offithe obligations of registered agent. 							r registered	l age	nt, or both, in the State of Flori	da. I am fa	amiliar with,	and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
			1	,								
FILE NOW!!! FEE IS \$150.00									9. Election Campaign Fina		\$5.0	0 May Be
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State									Trust Fund Contribution.		Added	to Fees
10.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND	l	R\$	11.			ADE	DITIONS/CHANGES TO OFFIC	YERS AND	DIRECTOR	S IN 11
TITLE	V	OF TOLITO AND	DINECTO	Delete	TITLE		1	ADL	JITIONS/CHANGES TO OFFIC	LIIS AND	Change	Addition
NAME	HANNOUSI	1. PETER A		□ Delete	NAME						change	[_] Addition
STREET ADDRESS 521 BIRNIE A					i i	T ADDRESS						
CITY-ST-ZIP	WEST SPR	INGFIELD MA				ST-ZIP						1
TITLE	ST			☐ Delete	TITLE						☐ Change	☐ Addition
NAME		I, NORMAN A	•	LLI Delete	NAME						Onlingo	Addition
STREET ADDRESS		TRIDGE ROAD			STREE	T ADDRESS	* /					
CITY-ST-ZIP	WEST SPR	NGFIELD MA			CITY-	ST-ZIP						
TITLE	P -		-	Delete	TITLE	5 0	_ ~ ~ ~			2 · 42 · 44	Change	Addition
NAME		i, anthony a			NAME							
STREET ADDRESS					STREE	T ADDRESS						
CITY-ST-ZIP	WEST SPRI	ngfield ma			CITY-	ST-ZIP						
TITLE	٧			☐ Delete	TITLE						☐ Change	☐ Addition
NAME		I, GEORGE A			NAME							
STREET ADDRESS	33 HANNO				STREE	T ADDRESS						
CITY-ST-ZIP	 	ngfield ma			CITY-	ST-ZIP						
TITLE	V	1.00 11 10 E-2		☐ Delete	TITLE						☐ Change	☐ Addition
NAME		I, CAMILE'A	- · -		NAME							}
STREET ADDRESS		ROOK TERRACE				T ADDRESS						
CITY-ST-ZIP :	MEO! JUH	NGFIELD MA		<u> </u>	CITY-	ST-ZIP						
TITLE				☐ Delete	TITLE		Vicit	Re	510 EMT	√ maja dika mala	Change	Addition
NAME			-		NAME		NABI	ا با	a, Hannoush			}
STREET ADDRESS						T ADDRESS	52 P	Ne 1	SANT CROSSING	•		
12. Thereby certify that the information supplied with this filling does not qualify for the						ST-ZIP	WEST	_57	PRINGFIELD, MA DI	1085		
12. Thereby of	certify that the	intermation supplied with	this filing i	does not qualify for	the exer	notion stat	ed in Section	on 1	19.07/3)/i\ Elorida Štatutes, Lf	urther certi	fy that the in	oformation

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: