DOCUMENT # H76305 1. Entity Name JEANE KAY, INC.					ì	FILED 02 AUG -5 PH 1:31			
Principal Place of Business 5002 N. ARMENIA AVE. TAMPA FL 33603 US Mailing Address 5002 N. ARMENIA AVE. TAMPA FL 33603 US						SECRETARY C TALLAHASSEE.	B12 B18 11 B28 11 B18 11		
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address			I INGIDIT AITH INNIN DEINN THAIN BAINE AITH AI	<u> </u>		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Stat	te	City & State	City & State			FEI Number 59-2546650	— —	oplied For	
Zip	Country Zip		Cour	Country		Certificate of Status Desired	\$8.75 Add	ditional	
	6. Name and Address of Curren	t Registered Agent	l		7. 1	Name and Address of New Register		<u>. </u>	
LIAMONICTE MANOY I/				Name					
HANCHETT, NANCY K 20320 LAKES EDGE LN LUTZ FL 33549				Street Address (P.O. Box Number is Not Acceptable)					
น์ -			City			Zip Cod	e		
8. The above the obligat	e named entity submits this statement tions of registered agent.	for the purpose of changing its	register	ed office or reg	istered ag	gent, or both, in the State of Florida. 1 a	am familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTI	E: Registere	d Agent signature re	quired when re	einstating) DAT	re .		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After September 13, 20 Make Check Payable				Fee will be \$7		Election Campaign Financing Trust Fund Contribution.		May Be to Fees	
11.				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD HANCHETT, NANCY KAY 20320 LAKES EDGE LN LUTZ FL	☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				200006941 -08/07/02-	□ Change 6852- -01055-0	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				1		****150.00	一些株式5	O. Okabition	
TITLE NAME Street address City-St-Zip		☐ Delete		ľ			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition	
TITLE Name Street address City-St-Zip		☐ Delete					☐ Change	Addition	
of the cor	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emp or on an attachment with a address,	s true and accurate and that m powered to execute this report :	w signat	ure shall have t	ha cama I	agal affect as if made under eath: that	t Lam an officer	or director	

SIGNATURE:

MACHELLARE

Attochment PH H71/305

Jeane Kay, Incorporated

5202 North Armenia Avenue Tampa, Florida 33603-1404 Phone (813) 872-0956

July 25, 2002

RE: DOCUMENT # H76305

Florida Department of State Division of Corporations Annual Reports Filings Post Office Box 1500 Tailahassee, Florida 32302-1500

Dear Sir or Madam,

This is in regard to filing of our 2002 Corporate Annual Report (enclosed with our check for \$150).

We realize this filing is delinquent, yet the reasons for this were beyond our control.

In early April, our business suffered an act of vandalism. While the resulting damage was small and the loss was not of a monetary nature, it nonetheless resulted in the theft and/or destruction of our company checkbook and a number of our files.

As a result, we were forced to recreate from memory the missing and/or destroyed papers and open a new bank account at another bank. Unfortunately, the UBR was one of many documents that we were unable to retrieve.

We respectfully request that you afford us a one-time exception to the late filing penalty and accept the enclosed check in payment of our 2002 UBR filing.

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Please call me should you have any questions.

Sincerély,

Nancy K. Hanchett

President