2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2001 8:00 am Secretary of State 05-22-2001 90034 044 ***150.00

DOCUMENT # J53539 1. Entity Name						05-22-2001 90034 044 ***150.00			
Jardac	ck Construction C	orp.	V		1				
	ace of Business	Mailing Address			٦.				
11101 SW 93rd Avenue 11101 SW 93rd Avenue Miami, FL 33176 Miami, FL 33176						, nans	6207		
 	<u> </u>			_		שטטע	10401		
2. Principal	Place of Business	3. Mailing Address		·					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Sta	ate	City & State			4. F	El Number		Applied For	_
Zip	Country	Zip	Co	untry	5. C	ertificate of Status Desired	□ \$6	8.75 Additional	
	6. Name and Address of Current I	Registered Agent			7. Na	ame and Address of New Re			
	i			Name					
	k, Hani Matti			Street Addres	ss (P.O. Box Number is Not Acceptable)				
	SW;93rd Avenue FL 33176								\neg
mianii,	LT 221/0			City			FL	Zip Code	ヿ
8. The above	e named entity submits this statement	for the purpose of changin	g its reg	stered office or	register	ed agent, or both, in the State	of Florida.	<u>-,</u>	7
SIGNATURE	Signature, typed or printed name of registe	ered agent and title if applicable	e. (NOTE: Registered	Agent si	gnature required when reinstating)	DATE	 _	
Tax filing r	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW! After MAY 1, 20 Make Check Payab	01 Fee	will be \$550.0		10. Election Campaign Fina. Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	- i .
11.	OFFICERS AND D	RECTORS	12.		ADDIT	IONS/CHANGES TO OFFICE	RS AND DI		٦Ē
TITLE NAME STREET ADORESS	PS; Jardack, Hani Ma 11101 SW 93rd Av		NAME	I .				Change Additi	SRZE034 (11/00)
CITY - ST - ZIP	Miami, FL 33176			· ST - ZIP					8
TITLE NAME	TD: Jardack, Hani Ma	Delete	TITLE	:	***			Change Additi	
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NAME			NAME	ĺ				۰۰۰۰ لــا - ،	
STREET ADDRESS CITY - ST - ZIP				ST - ZIP					
13. I hereby ce information officer or di	I prify that the information supplied with a indicated on this report or supplement irector of the corporation or the receive or Block 12 if changed, or on an attact	ntal report is true and accur er or trustee empowered to	for the e rate and execute	xemption stated that my signatu this report as re	re shall equired	have the same legal effect as by Chapter 607, Florida Statu	if made und tes; and tha	der oath; that I am a t my name appears	`
SIGNATI	URE: Hann	- Duk		·		5/01/01			
TE EL 22284 E 4	SIGNATURE AND TYPED	OR PRINTED NAME OF SIGN	ING OFF	CER OR DIRECT	OR .	Date	Dayt	ime Phone #	_

HAN I JARDACK