2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J62894

1. Entity Name

HAIN ENTERPRISES, INC.

FILED Apr 19, 2001 8:00 am Secretary of State 04-19-2001 90071 038 ***150.00

Country Zp	Principal Placi	e of business	Mailing Address									
Suite, Apt. 4, otc. City & State City & City & State City &	881 S.W. 15TH STREET		881 S.W. 15TH STREET BOCA RATON FL 33486									
City & State City & State City & State City & State Country S. Certificate of Status Desired Start Additional Fee Paqualities Street Additional Fee Paqualities Name Name Name Street Additional (F. O. Box Number is Not Acceptable) Street Additional (F. D. Box Numbe	2. Principal P	lace of Business	3. Mailing Address									
Zip Country Zip Country S. Certificate of Status Desired Spent Status Desired Status Desired Status Desired Spent Status Desired Agent Status Desir	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
Country Country Country Country Se. Certificate of Status Desired Se.75 Additional Fee Required Se.75 Additional Se.75 Additi	City & State	Э	City & State .			4.	FEI Number	59-27848	00	-	pplied For lot Applicable	
HAIN, JOSEPH 881 S.W. 15TH STREET BOCA RATON FL 33488 City FL Zip Code City FL Zip Code City FL Zip Code City FL C	Zip	Country	Zip	Cour	htry	5.	Certificate of	Status Desired				
HAIN, JOSEPH 881 S.W. 15TH STREET BOCA RATON FL 33486 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 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elicits to do so (See criteria or back) After MAY 1, 2001 Fee will be \$55.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 11. Election Campaign Financing Added to Fees (See Criteria or back) Active State 1. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 11. Election Campaign Financing Added to Fees (See Criteria or back) Active State 1. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 11. Election Campaign Financing Added to Fees (See Criteria or back) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 13. OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 15. OFFICERS AND DIRECTORS 11. 16. OFFICERS AND DIRECTORS 11. 17. OFFICERS AND DIRECTORS 11. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 10. OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 10. OFFICERS AND DIRECTORS 11. 10. OFFICERS AND DIRECTORS 11. 11. OFFICERS AND DIRECTORS 11. 12. ADDITIONS/		6. Name and Address of Current F	legistered Agent		1	7.	Name and Ac	dress of New	Registered A	gent		
881 S.W. 15TH STREET BOCA RATON FL 33488 City FL Zip Code					- Name							
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE SIGNATURE 9. This corporation is elligible to satisfy its Intangible (Tar filing requirement and elects to do so. IX) After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE NAME STREET ADDRESS CITY-ST-2P DST HAIN, JOSEPH SAB SW. 15TH STREET DST Delete DST HAIN, WALTRAUD STREET ADDRESS CITY-ST-2P Delete TITLE NAME STREET ADDRESS CITY-ST-2P TITLE Delete TITLE Delete TITLE NAME NAME NAME NAME NAME STREET ADDRESS CITY-ST-2P TITLE Delete TITLE Delete TITLE Delete TITLE NAME NAME STREET ADDRESS CITY-ST-2P TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-2P TITLE TITL	881 5	S.W. 15TH STREET			Street Addres	ss (P.O. I	Box Number is	s Not Acceptal	ole)			
8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. SIGNATURE Signature typed or printed raine of registered agent and 10s it set (applicable). [NOTE Registered Agent appraise occurred when reinhalding) DATE 9. This corporation is elligible to salidary its Intangible Tax filing requirement and elects to do so. [Soe criteria on back) DATE 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME SIREE ADDRESS OTHY-ST-ZIP BOCA RATON FL Delete TITLE NAME SIREE ADDRESS OTHY-ST-ZIP BOCA RATON FL Delete TITLE NAME SIREE ADDRESS OTHY-ST-ZIP TITLE TITLE NAME SIREE ADDRESS OTHY-ST-ZIP TITLE TITLE NAME SIREE ADDRESS OTHY-ST-ZIP TITLE T					City				Fi	Zip Cor	de	
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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	13 I hereby o	ertify that the information supplied with	this filing does not qualify for	or the exe	mption stated in	Section	119.07(3)(i)	Florida Statutes	s. I further certi	fy that the	information	

changed, or on an attachment with an address, with all other like empowered.

<u>561-391-5003</u>