## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 24, 2002 8:00 am <sup>8</sup> Secretary of State DOCUMENT # L9900009120 1. Entity Name 03-24-2002 90036 043 \*\*\*\*50.00 HANNA WAREHOUSE & DISTRIBUTION, LLC Principal Place of Business Mailing Address 1900 SW 57TH AVENUE 1900 SW 57TH AVENUE 933333 SUITE 2 SHITE 2 MIAMI FL 33155 **MIAMI FL 33155** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0969726 Not Applicable Country Zip Country Zip \$5.00 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WINER, RUSSELL R ESQ. Street Address (P.O. Box Number is Not Acceptable) 1904 E. BUSCH BOULEVARD **TAMPA FL 33612** Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. MGR Change ☐ Addition TITLE □ Delete TITLE WOODRUFF, ROY F TRUSTEE NAME NAME STREET ADDRESS STREET ADDRESS 1900 SW 57TH AVENUE, STE. 2 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33155** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS ÇITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the peopler or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

REROY F WOODRUFF

**FILED** 

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