

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90485 005 ***150.00

DOCUMENT # P00000046796

1. Entity Name

LAN EMBROIDERY, INC.

Principal Place of Business

**1401 S. DIXIE STE 2 EAST
POMPANO BEACH FL 33060**

Mailing Address

**1401 S. DIXIE STE 2 EAST
POMPANO BEACH FL 33060**

DULLED



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5601 POWERLINE RD

3. Mailing Address

5601 POWERLINE RD

Suite, Apt. #, etc.

203

Suite, Apt. #, etc.

203

City & State

FT. LAUDERDALE

City & State

FT. LAUDERDALE

4. FEI Number

65-1003013

Applied For

Not Applicable

Zip

FL 33309

Country

US

Zip

FL 33309

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JENNINGS, KEVIN

**1401 S. DIXIE STE 2 EAST
POMPANO BEACH FL 33060**

Name

Jennings, Kevin

Street Address (P.O. Box Number is Not Acceptable)

5601 Powerline Rd.

Suite 203

City

Fort Lauderdale

FL

Zip Code

33309

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

Kevin Jennings

Kevin Jennings President

4/30/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** ☐ Delete
NAME **JENNINGS, KEVIN**
STREET ADDRESS **1401 S. DIXIE STE 2 EAST**
CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE ☒ Change ☐ Addition
NAME **5601 Powerline Rd suite 203**
STREET ADDRESS **Fort Lauderdale, FL 33309**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kevin Jennings **RE President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02 954-771-8889

Date

Daytime Phone #

CR2E034 (9/01)