## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Mar 05, 2002 8:00 am Secretary of State P00000062158 DOCUMENT # 1. Entity Name 03-05-2002 90022 014 \*\*\*150.00 3955 HANOVER CORPORATION Principal Place of Business Mailing Address C/O KENT HUFFMAN, ESQ. C/O KENT HUFFMAN. ESO. 223 SUNSET AVE. SUITE 260 223 SUNSET AVE. SUITE 260 PALM BEACH FL 33480 PALM BEACH FL 33480 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-1025502 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HUFFMAN, KENT Street Address (P.O. Box Number is Not Acceptable) 223 SUNSET AVE, SUITE 260 PALM BEACH FL 33480 City Zip Code 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. 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. P/5/D TITLE ☐ Delete TITLE ☐ Change ☐ Addition PAYAN ELIZABETH PAYAN NAME STREET ADDRESS 3999 HANOVER CIRCLE STREET ADDRESS 3955 HANOVER CIRCLE CITY-ST-ZIP LOXAHATGHEE FL 33470 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete JITLE \_\_\_\_ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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

**FILED** 

## Attachment # P00000062158

KENT HUFFMAN ATTORNEY AT LAW

223 SUNSET AVENUE SUITE 260 PALM BEACH, FLORIDA 33480

TELEPHONE (561) 833-5833 TELECOPIER (561) 835-0855

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Secretary of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: 3955 HANOVER CORPORATION

Dear Sirs:

Accompanying this letter you will find the 2002 UNIFORM BUSINESS REPORT of the above referenced corporation, and a check in the amount of \$150.00, payable to the Secretary of State to cover your fee for this filing.

Sincerely,

Kent Hurfman

KH/mac