DOCU	MENT # P'000000 mano, Inc.	FILED Sep 10, 2001 8:00 am Secretary of State 09-10-2001 90045 003 ***150.00						
4104 El Jo	ce of Business Eljabean Road Abean, Il. 33953	Mailing Address 4104 Ed Ed Jod	ljobean Lean, A	, Rood 1. 339	o 53 775	0 4 9		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		•	DO NOT WRITE IN THIS SPACE			
City & State		City & State					Applied For Not Applicable	}
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 / Fee Requ	Additional uired	1
	6. Name and Address of Current I		Name	•	7. Name and Address of New Regi	istered Agent		1
Ma		Address /P (	ss (P.O. Box Number is Not Acceptable)					
. 579	4 Stonemont N	Street Address (P.			.U. Box Number is Not Acceptable)			
We	nnino Decisepp 4 Stonemont N ston, Il. 33326	· ·	City		FL Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its r	egistered office o	r registered	agent, or both, in the State of Florida	a.		1
SIGNATURE .	Sign fore, typed or prints have of resistered agent a	nd title if applicable. (NOTE:	Registered Agent signar	ture required wh	$\mathcal{L} - 2$	28 - O	<u> </u>	
~~ Tax filling r	pration is eligible to satisfy its Intangible requirement and elects to do so:	After MAY-1; 200		550.00	10. Election Campaign Finance Trust Fund Contribution.		5.00 May Be	
11.	OFFICERS AND I	Make Check Payable	12.	it or state	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	ORS IN 11	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jessaro Mich	ael L. 33442	TITLE NAME STREET ADDRESS			☐ Chang	e 🗌 Addition	E034 (11/00)
TITLE NAME STREET ADDRESS	Manning Pau 574 Storenount	Delete Delete	TITLE NAME STREET ADDRESS			☐ Chang	e [] Addition	CR2E
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wester H. 33. 570 Morning, Live 574 Storemount Wester H. 333	326 Delete NOr.	CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- W. WILLOW , SA. 333	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	e 🗍 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[] Chang	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	☐ Chango		
of the corp	errify that the information supplied with on this report or supplemental report in poration or the receiver or trustee empor or on an attachment with an address, w	rue and accurate and that my vered to execute this report as	r signature shall h s required by Cha	ave the san	ne legal effect as if made under noth	<ul> <li>that I am an offic</li> </ul>	er or director	

AHachment #P0000075765 775049

## JOROMAÑO, INC. 4104 ELJOBEAN ROAD ELJOBEAN, FL. 33953

August 28, 2001

State of Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

UNIFORM BUSINESS REPORT

JOROMANO, INC.

**COCUMENT # P00000075265** 

FEIN # 65-1053310

Dear Sir/Madam:

Please be advised that we did not receive the pre printed/original Uniform Business Report Packet for 2001 for the above-mentioned corporation as we had moved and had a problem with our mail being forwarded properly.

Enclosed please find a check in the amount of \$150.00 for the original fee with the signed report.

Thank you for your cooperation in this matter.

Sincerely,

Alense Moenico
Giuseppe Marrino
Secretary, Treasurer

Ubrjoromaro08-28-01