

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 10, 2001 8:00 am
Secretary of State

04-23-2001 90055 036 ***150.00

DOCUMENT # P00000083942

1. Entity Name ->

JANIE'S POPCORN & PEANUTS, INC.

Principal Place of Business

7300 N.W. 12TH AVENUE
MIAMI FL 33150

Mailing Address

7300 N.W. 12TH AVENUE
MIAMI FL 33150

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FJ Number

65-050-3990

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MENENDEZ, ABEL
7300 N.W. 12TH AVENUE
MIAMI FL 33150

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when registering)

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, 2001 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

TITLE	D	☐ Delete
NAME	MENENDEZ, THELMA	
STREET ADDRESS	2850 S.W. 28TH STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D	☐ Delete
NAME	MENENDEZ, ABEL	
STREET ADDRESS	2850 S.W. 28TH STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	6920 SW 92nd Ave	
STREET ADDRESS	MIAMI FL 33173	
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	6920 SW 92nd Ave	
STREET ADDRESS	MIAMI FL 33173	
CITY-ST-ZIP		
TITLE		☐ Change ☒ Addition
NAME	JOSE L. ROSA JR.	
STREET ADDRESS	6920 SW 92nd Ave	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		☐ Change ☒ Addition
NAME	JOSE L. MENENDEZ	
STREET ADDRESS	6920 SW 92nd Ave	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

Thelma Menendez THELMA MENENDEZ

4/6/01

201-826-9999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Ordinary Phone #

CR2E034 (10/00)