## **DOCUMENT #** P00000095157

1. Entity Name

HENA ENTERPRISES, INC.

## FILED Mar 13, 2002 8:00 am § Secretary of State 03-13-2002 90012 005 \*\*\*150.00

Principal Place of Business 11380 PROSPERITY FARMS RD., SUITE 112 PALM BCH GARDENS FL 33410		Mailing Address 11380 PROSPERITY FARMS RD., SUITE 112 PALM BCH GARDENS FL 33410							
2. Delayer Flore of Duplace									
2. Principal Place of Business		3. Mailing Address			1 10011601 111 00111 00111 01	åtti matti äälli mätia ta	181 81191 1196	GIIII (BB) (BB)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		I	FEI Number -1048811 55-0603403		· -	pplied For ot Applicable	
Zip	Country	Zip	Country		Certificate of Status Desir	<u> </u>	<b>8.75</b> Ad ee Require		
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent Name					
1	JGH, MICHAEL J OSPERITY FARMS RD., SUITE 11	2			D. Box Number is Not Acceptable)				
	H GARDENS FL 33410	-							
			City			FL	Zip Cod	de	
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									
- √ Tax filing r	oration-is eligible to satisfy-its Intangible equirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Si		50.00	<b>10.</b> Election Campaig Trust Fund Contril	` <u></u> -		00 May Be d to Fees	
11. OFFICERS AND DIRECTORS 12.					DITIONS/CHANGES TO	OFFICERS AND D	IRECTOR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOSSAIN, MD MOSHARRAF 4100 ILEX CT. PALM BCH GARDENS FL 33410	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	,		Change	Addition S	
TITLE NAME	D AKHTER, NAZMA	Delete	TITLE NAME				Change	Addition	
STREET ADDRESS CITY-ST-ZIP	4100 ILEX CT. PALM BCH GARDENS FL 33410		STREET ADDRESS CITY-ST-ZIP						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	

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 arn 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:

MKHONUTAE REQUIRED

2-20-02

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE ATLANTA GA 39901

DATE OF THIS NOTICE: 10-31-2000 NUMBER OF THIS NOTICE: CP 576 A EMPLOYER IDENTIFICATION NUMBER: 65-1048811 FORM: 1120 0716534522 B

while

FOR ASSISTANCE CALL US AT: 1-800-829-1040

HENA ENTERPRISES INC 4100 ILEX CT

PALM-BEACH-GARDENS FL 33410.

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

As we were processing your Form 1120 for tax period 122000, we found that your form didn't have a valid employer identification number (EIN). Our records show no EIN assigned to this business. Since an EIN is required by law, we assigned you EIN 65-1068811 65-1048811. Please keep this notice for your records.

Use your name and EIN exactly as shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIN it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIN.

Every taxpayer must figure taxable income on the basis of an annual accounting period, called a tax year. For trusts, your tax year must generally be a calendar year, unless you are a charitable trust or are exempt from tax under the law. For partnerships, your tax year must conform with either the tax year of the the majority partners, the tax year of the principal owners, or a calendar year, in that order, unless you establish a business purpose for using a different tax year. A personal service corporation must use a calendar year as its tax year, unless you establish a business purpose for using a different tax year. For further information, see Publication 538 (Accounting Periods and Methods), available at most IRS offices.

We've enclosed a Form SS-4, Application for Employer Identification Number (EIN), for you to complete so your account record will be complete. Please return the form with the bottom part of this notice within 15 days. We've enclosed an envelope for your convenience.

If you already have an EIN, return the bottom part of this notice to us. Wri in the exact name and EIN shown on the notice you received assigning you that EIN.

Thank you for your cooperation.

Keep this part for your records.

CP 576 A (Rev. 7-1997)

Return this part with your Form SS-4, Application for Employer Identification Number. Please correct any errors in your name or address.

CP 576 A

0716534522

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 10-31-2000

EMPLOYER IDENTIFICATION NUMBER: 65-1048811

FORM: 1120

INTERNAL REVENUE SERVICE ATLANTA GA 39901

HENA ENTERPRISES INC 4100 ILEX CT PALM BEACH GARDENS FL

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