

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000020665

1. Entity Name
HANNA HOMES CONSTRUCTION INC.



2885 ELECTRONIC DR.
UNIT D-14
MELBOURNE FL 32935

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
13 EAST MELBOURNE
AVE, SUITE F
MELBOURNE, FL 32901

Mailing Address
13 EAST MELBOURNE
AVE, SUITE F
MELBOURNE, FL 32901

MOVED

2. Principal Place of Business

2885 ELECTRONIC DR.

3. Mailing Address

2885 ELECTRONIC

DR.

Suite, Apt. #, etc.

UNIT D-14

Suite, Apt. #, etc.

UNIT D-14

☐ CHECK HERE IF MAKING CHANGES

City & State

MELBOURNE FL

City & State

MELBOURNE FL

4. FEI Number

59-3704261

Applied For

Not Applicable

Zip

32935

Country

USA

Zip

32935

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOZORG, HOMAYON
325 TANGLE RUN BLVD
#1113
MELBOURNE, FL 32940

7. Name and Address of New Registered Agent

Name

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

N/A

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. I am familiar with, and accept the obligations of registered agent.

N/A

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BOZORG, HOMAYON
STREET ADDRESS 325 TANGLE RUN BLVD # 1113
CITY-ST-ZIP MELBOURNE, FL 32940

☐ Delete

TITLE VT
NAME BOZORG, HAYDEH
STREET ADDRESS 325 TANGLE RUN BLVD # 1113
CITY-ST-ZIP MELBOURNE, FL 32940

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOMAYON BOZORG

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOMAYON BOZORG 3/30/03

Case

Daytime Phone #

321-508-5434

21 4/5

CR2E034 (10/02)