2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT#** P01000085597

FILED Sep 11, 2002 8:00 am Secretary of State

1. Entity Name JOHANNA I, INC.						09-11-2002 90122 023 ***150.00		
Principal Place of Business Mailing Address				7				
320 N ATLANTIC AVE COCOA BCH FL 3293	-	750 N ATLANTIC AVE #609 COCOA BCH FL 32931				¥74528		
2. Principal Place of Business		3. Mailing Address				1 180/1807 PM 48180 AIRN 8810 8810 8810 8810 BARA 1810 BARA 1810 BARA 1817 1817 1817 1817 1817		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State		City & State			4.	FEI Number 59-374544 Applied For Not Applicable		
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	lame and Address of Current R	egistered Agent =	<u> </u>			Name and Address of New Registered Agent		
•				Name		and the same of th		
RIGERMAN, MAR 200 N FIRST ST		Street Addres		(P.O. E	(P.O. Box Number is Not Acceptable)			
COCOA BCH FL	32931							
				City		FL Zip Code		
8. The above named the obligations of re	entity submits this statement for egistered agent.	the purpose of changing its	registere	ed office or registe	ered ag	gent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE	typed or printed name of registered agent an					einstating) DATE		
	s eligible to satisfy its Intangible nent and elects to do so.	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750. Make Check Payable to Department of Sta			0.00	10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		
11.	OFFICERS AND D	IRECTORS	12.		ΑD	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
STREET ADDRESS 750 N	IS, JOHANNA ATLANTIC AVE #609 A BCH FL 32931	☐ Delete		1		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE			☐ Change ☐ Addition		
NTTLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				☐ Change ☐ Addition		
TITLE IAME STREET ADDRESS DITY-ST-ZIP		☐ Delete		i i		☐ Change ☐ Addition		
TITLE HAME STREET ADDRESS CITY-ST-ZIP	at the information cumoliced with the	Delete	CITY-	T ADDRESS ST-ZIP	nation 1	Change Addition 119.07(3)(i), Florida Statutes. I further certify that the information		

indicated on this report or 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 of the corporation or the receiver of 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.

| GNATURE: | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

AHackbert De. #

Johanna 1, Inc. 320N. Atlantic Ave Cocoa Beach, FL 32931



Grander Anderson

5 Sep 2002

To: Divisions of Corporations

Uniform-Business-Report-Filings-

PO Box 1500

Tallahassee, FL 32302-1500

Dear Sirs/Madams

Please be advised that our corporation did not receive a prior notice and the enclosed form is our first notice.

In accordance with you instructions, we are enclosing a \$150.00 check filing fee.

Regards

Johanna Harris

321-784-2213