2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P02000011576 **DOCUMENT #**

1. Entity Name

JENNOOP INC.



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90274 029 ***150.00

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Principal Place of Business 10306 NW 48TH CT CORAL SPRINGS FL 33076			Mailing Address 10306 NW 48TH CT CORAL SPRINGS FL 33076										
2. Principal Pl	ace of Busin	ness	3. Mai	3. Mailing Address								11 5 1114 1134	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State				City & State				4. FEI Number 01-0595793 Applied Fo			plied For t Applicable		
Zip Country			Zip	Zip Country				5. C	Certificate of Status Desired		8.75 Addi		
	C. Norman	and Address of Current	Pogletors	Projetored Agent				7. Name and Address of New Registered Agent					
6. Name and Address of Current Registered Agent Name								7. (14.110 4.114 4.					
10010 154	INDECD I	e de la companya de		1.4 2 1/2									
IORIO, JENNIFER J				Street Address			iress (P.	(P.O. Box Number is Not Acceptable)					
10306 NW		÷				 -			·				
CORAL SP	rings fl	33076						~					
						City				FL	Zip Code		
8. The above the obligati	named entitions of regis	y submits this statement for tered agent.	or the purp	ose of changing its	register	ed office or re	egistered	dage	ent, or both, in the State of Flori	da. I am fa	miliar with, a	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE	: Registere	d Agent signature	required w	hen rei	instaling)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				ate					Election Campaign Fina Trust Fund Contribution.			May Be to Fees	
10.	·	OFFICERS AND	DIRECTO	DIRECTORS 11.				ADI	DITIONS/CHANGES TO OFFIC	ERS AND	DIRECTORS	3 IN 11	
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	certify that the	ne information supplied wit	h this filine	does not qualify fo	or the exc	emption state	d in Sec	ction	119.07(3)(i), Florida Statutes. I	further cert	ify that the i	nformation	

I nereby 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 10 or Block 11 if changed, or on an attack meht with an address, with all other like empowered.

SIGNATURE: