## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P060000 11473

## **FILED** Jun 04, 2007 8:00 am Secretary of State 05-04-2007 90077 002 \*\*\*150.00

1. Entity Name YANI EXP. 2614 SW 34 MINMIF.				
DO NOT WRITE IN THIS SPACE			66017611	
2. Principal Place of Business  YANI EXPRESSING  Suite, Apt. #, etc.  Suite, Apt. #, etc.		11215	DO NOT WRITE IN THIS SPACE	
City & State  M   RM   FL	Siw 3 U LIVE Suite, Apl. 11, etc. 1) / U1 E		4. FEI Number //- 379 /2 73 Applied For Not Applicable	1
210 Country 33/33 ONDE	Zíp	Country	5. Certificate of Status Desired	ŀ
DO NOT WRITE IN THIS SPACE			7. Name and Address of Current Registered Agent  10 N O S K 1 V / R M D N T E  (P.O. Box Number is Not Acceptable)	
		261 City M	145W 34 NVE 1 B M 1 FL Zip Code 3 3 1 (3 3	
The above named entity submits this statement for the obligations of registered agent.	the purpose of changing its re		ered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE  Squature, typed or printed name of required agent and  January 1 - May 1 Fee is \$150.00  After May 1, Fee is \$550.00  Amended UBR is \$61.25  Make Check Payable to Florida Department of 8		egistered Agent signature require	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees	
10. OFFICERS AND D  TITLE  NAME  PRES.  VRN05KI / RM07  STREET ADDRESS 2614 6W 34 NUS  CITY-SI-ZIP  MIRMIFL. 3	√ T <b>E</b> ⊈	TITLE HAME STREET ADDRESS CITY-ST-ZIP		CR2E034B (12/02)
TITLE NAME STREET ADDRESS CITY- ST-2IP		TITLE NAME STREET ADDRESS CITY-SI-ZIP		CR2E00
TITLE NAME STREET ADDRESS CITY-ST-24P		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
TITLE HAME STREET ADDRESS CITY- ST- ZIP		Title Manne Street address City-St-Zip	IN THIS SPACE	
TITLE RAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-S1-ZIP		TITLE HAME STREET ADDRESS CITY-SY-ZIP		
indicated on this report or supplemental report is t	rue and accurate and that my wered to execute this report a	signature shall have the	Section 119.07(3)(i), Florida Statutes, I further certify that the information a same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or on an	
SIGNATURE:	INTED NAME OF SIGNING OFFICER OR	NØEC YOR	0 4 / 30 / 0 7	