FILED Jun 25, 2002 8:00 am Secretary of State 2002 UNIFORM BUSINESS REPORT (UBR) P97000017668 **DOCUMENT #** 1. Entity Name 05-23-2002 90061 022 ***150.00 JACKANT ENTERPRISES, INC. Principal Place of Business Mailing Address 340 I / 925 HUNTING LODGE DR 925 HUNTING LODGE DR MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33168 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0735421 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, JOAQUIN R Street Address (P.O. Box Number is Not Acceptable) 1780 W, 2 AVE. HIALEAH FL 33010 6. The above entity/sudmits this statement for the purpose of/changing its registered office or registered agent both in the State of Florida. SIGNA 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax fiting requirement and elects to do so. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Delete (9/0) HERNANDEZ, JOAQUIN R NAME NAME STREET ADDRESS 1780 W, 2 AVE. STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition HERNANDEZ, JOAQUIN R NAME NAME STREET ADDRESS 1780 W. 2 AVE. STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP IHLÈ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP 13. I hereby certify that the information 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 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 11 or Block 12 if changed, or or an attact menuity in an address, with all pither like empowered.