2002 Uniform Business Report (UBR)

Mar 13, 2002 8:00 am P97000035837 DOCUMENT # **Secretary of State** 1. Entity Name JANEXIS CORPORATION 03-13-2002 90140 004 ***150.00 Principal Place of Business Mailing Address 15455 WEST DIXIE HIGHWAY, SUITE I 15455 WEST DIXIE HIGHWAY, SUITE I NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 33162 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0740913 Not Applicable 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 60LDSTEIN COOPER_MATTHEW 15455 WEST DIXIE HIGHWAY, SUITE I NORTH MIAMI-BEACH-EL 33162 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 FPHEN SIGNATURE d agent and title if applicable Signature, typed o 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. (9/01) TITLE TITLE ☐ Change Addition Delete COOPER, MATTHEW NAME NAME CR2E034 STREET ADDRESS 10000 W. BAY HARBOR DRIVE #303 STREET ADDRESS BAY HARBOR FL 33154 CITY-ST-ZIP CITY-ST-ZIP PRESTOENT, 5, 1, 0 STD ☐ Delete Change Addition TITLE TITLE STEPHEN GOLDMEIN GOLDSTEIN, STEPHEN B NAME NAME STREET ADDRESS 2051 N.E. 214 STREET STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Defete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby 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 11 or Block 12 if

JIRED JEPHEN Goldtein 2/20/02 SIGNATURE: