

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

102

02 JUL 26 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

700006855307--5  
-08/01/02--01047--032  
\*\*\*\*150.00 \*\*\*\*150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # *P 97000046138*

1. Entity Name

*FANOR INC*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

*FANOR INC*

3. Mailing Address

Suite, Apt. #, etc.

*4159 N Dixie Hwy*

City & State  
*Dothan AL*

City & State

Zip  
*33064* Country  
*USA*

Zip

Country

4. FEI Number

*65-0760606*

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

*JEAN ST FORT*

Street Address (P.O. Box Number is Not Acceptable)

*2860 NE 5th St*

City

*Dothan AL*

FL

Zip Code

*33435*

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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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

- Tax filing requirement and elects to do so. ☐
- (See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*D  
ST. FORT JEAN C  
4159 N Dixie Hwy  
Dothan AL 33064*

TITLE  
NAME  
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CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*President 6-10-02*

CR2E034B (12/01)

2 of 2

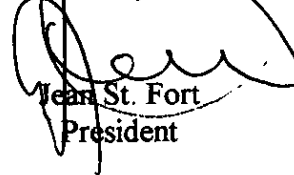
Fanor Inc.  
4159 N. Dixie Highway  
Pompano Beach, Fl 33064

DIVISION OF CORPORATIONS  
Corporate Records  
P.O. Box 6327  
Tallahassee, Florida 32314

To whom it may concern:

I give my sincere apology for not receiving the renewal letter for my corporation in the year 2001. During which time, I was moving it from the address 1459 N. Congress Ave. Delray Beach, Florida 33444 to the current address stated above. I have spoken to one of the employees last week, and I was told that I would be able to send another check with a letter explaining the situation so that my corporation would be reinstated. I was also told to send a check for last year's payment as well as one for this year.

Sincerely,



Jean St. Fort  
President