2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

P97000081965

1. Entity Name

JENAYSIS, INC.



FILED Feb 12, 2003 8:00 am Secretary of State 02-12-2003 90120 011 ***150.00

				NE TO		
Principal Place of 18700 S.W. 105TH		Mailing Address 18700 S.W. 105TH AVENUE MIAMI FL 33157				
2. Principal Place	e of Business	3. Mailing Address		7	BA 11860 18618 BIHAN BAIL 1888	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number 65-0779321	Applied For Not Applicable
Zip	Country	Zip Country		ntry		8.75 Additional ee Required
	6. Name and Address of Cu	irrent Registered Agen	t ' '		7. Name and Address of New Registered Ag	gent
				Name	•	
CANNON, RIC			Street Addres		s (P.O. Box Number is Not Acceptable)	
18700 S.W. 1 MIAMI FL 331	105TH AVENUE 157					
				City	FL	Zip Code
8. The above nar the obligations	med entity submits this statems of registered agent.	nent for the purpose of c	hanging its register	ed office or register	red agent, or both, in the State of Florida. I am fa	miliar with, and accept
SIGNATURE	nature, typed or printed name of registere	d agent and title if applicable.	(NOTE: Registere	ed Agent signature required	d when reinstating) DATE	
	NOW!!! FEE IS \$150.0	- 1			9. Election Campaign Financing	\$5.00 May Be

	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State			Trust Fund Contribution. Added to Fees		
10.	OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANNON, RICHARD 18700 S.W. 105TH AVENUE MIAMI FL 33157	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. , Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE		□ Doloto	TITLE	Change C Addition		

12. 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 10 or Block 11 if changed, or on an attachment with an addrass, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

☐ Addition