2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90029 026 ***150.00

DOCUMENT # P99000019449 N/C 1-16-01

1. Entity Name
SAMRAF TRADING, INC. CHANGED NAME TO JONAND, INC. (TM)

Principal Place of Business	Mailing Address
C/O BRAHM & LEVINE, CPA 515 NORTH FLAGLER DRIVE #300-P WEST PALM BEACH FL 33401	C/O BRAHM & LEVINE, CPA 515 NORTH FLAGLER DRIVE #300-P WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
c/o BRAHM D. LEVINE	c/o BRAHM D. LEVINE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-1009391

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEVINE, BRAHM &	Name: LEVINE, BRAHM D.
515 N FLAGLER DRIVE	Street Address (P.O. Box Number is Not Acceptable):
#300 P	
WEST PALM BEACH FL 33401	City: FL Zip Code:

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 by law) Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD BETTAN, RAFFI 515 NORTH FLAGLER DRIVE #300-P WEST PALM BEACH FL 33401	☑ Delete	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	P, D SAMUEL Z. ELTES 7800 BOUL. DECARIE MONTREAL, QUEBEC, CANADA H4P 2H4 ☑ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S, T, D JEFFREY G. BUDNING 7800 BOUL. DECARIE MONTREAL, QUEBEC, CANADA H4P 2H4 ☑ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Add

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 a director or officer 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 above, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ JEFFREY BUDNING 04/18/01 514-735-1199
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (10-00)