## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000024939

1. Entity Name

HAN SHAN ENTERPRISES, INC.



## FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90235 002 \*\*\*150.00

							E TRES							
Principal Place of Business 333 17TH STREET SUITE U VERO BEACH FL 32960 US			Mailing Address P.O BOX 971 VERO BEACH FL 32961 US											
2. Principal Place of Business			3. Mailing Address							III BBILL BB		II BJBSB 8888	IB (((()B (B)) (BB)	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES						
City & State			City & State					4. FEI Number 65-0979518				-	Applied For	7
Zip Country			Zip C			Country 5.		<b>5.</b> Ce	ertificate of Status Desire	ed		8.75 A	dditional	1
	6. Name	and Address of Current	Registered Agent				7. Name and Address of New Registered Agent							1
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MCHUGH,	JOHN J J	₹ .				0,	44 /5	0.0.	Al la Sablat Assault	-1.1.3				┨
333 17TH STREET						Street A	aaress (P.	O. 80	x Number is Not Accept	able)				
SUITE U		•					1°-4416-14-41-14-7-1-7-1-1							1
VERO BEACH FL 32960						City					FL	Zip Co	de	1
the obligati	ons of regist	y submits this statement fo ered agent or printed parte of registered agent s				ed office or				of Florida	a. I am far	miliar with	n, and accept	
FiLE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					. ,				9. Election Campaign Trust Fund Contrib		cing		00 May Be ed to Fees	
10.	·	OFFICERS AND	DIRECTOR	S	11.			ADD	DITIONS/CHANGES TO	OFFICE	RS AND E	DIRECTOR	RS IN 11	1.
NAME	333 17TH	ICHARD W STREET SUITE U ICH FL 32960		☐ Delete							(	Change	☐ Addition	00,000
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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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-03

772 231 5221

Daytime Phone #