2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P99000103882

Mailing Address

401 S.W. MARTIN LUTHER KING BLVD.

1. Entity Name

JANE HANNAH'S, INC.

401 S.W. MARTIN LUTHER KING BLVD.

Principal Place of Business

BELLE GLADE FL 33430			BELLE GLADE FL 33430									
2. Principal P	Place of Busin	ness	3. Mailing Address								 	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State	e		City & State			<u> </u>	4.	FEI Number 65-0984695			plied For]
Zip Country			Zip		Country		5.	Certificate of Status Desired		8.75 Add	litional	1
	6. Name	and Address of Current I	Registered	i Agent				Name and Address of New Regi	stered Ac	ent		1
MCLEAN,						Name		Ţ.		-]-
401 S.W.	MARTIN LU	THER KING BLVD.	·			Street Address (P.O. Box Number is Not Acceptable)						
BELLE GL	ADE FL 334	430				City				Zip Code		-
XWI	75/-e	en				Oity			FL	Zip 000	_	
a. The above the obligat	named entititions of regist	y submits this statement for tered agent.	the purpo	se of changing its	registere	ed office or reg	istered ag	ent, or both, in the State of Florida	ı. I am fa	miliar with,	and accept	
SIGNATURE .	Signature, typed	or printed hame of registered agent a	nd title if applic	cable. (NOTE	: Registere	d Agent signature re	quired when re	einstating)	DATE			1
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 Financing Trust Fund Contribution. Added to Fees												
10.		OFFICERS AND I	DIRECTOR	IS	11.		ΑC	DDITIONS/CHANGES TO OFFICE	RS AND [DIRECTOR	3 IN 11	1
ITLE	P			☐ Delete	TITLE			•		Change	☐ Addition] 8
¥. \$ ∕1E	MCLEAN,				NAM	E						15
STREET ADDRESS CITY-ST-ZIP		Martin Luther King ADE FL 33430	BLVD.			ET ADDRESS - ST- ZIP						E034 (10/02
TITLE				☐ Delete	TITLE				i	Change	Addition	126
VAME					NAM					•		-
STREET ADDRESS CITY-ST-ZIP	E					ET ADDRESS -ST-ZIP						
	- " " ?			☐ Delete	_		,	المتعلق	ا جيسيان	*Change	- [T]. Addition	┥
TITLE NAME				□ Delete	NAM	I			., ., .	r Unange	Addition	-
STREET ADDRESS						ET ADDRESS						ĺ
CITY-ST-ZIP					CITY	-ST-ZIP						
TITLE				☐ Delete	TITLE					Change	Addition	1
NAME					NAM	:						
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP					CITY	-ST-ZIP		 				1
TITLE				Delete	TITLE	I .			[Change	☐ Addition	
NAME STREET ADDRESS					NAMI	ET ADDRESS						
CITY-ST-ZIP						-ST-ZIP						
TITLE				Delete	TITLE					Change	Addition	
IAME		•	•	- Dalete	NAMI					onange	,	
STREET ADDRESS		•				ET ADDRESS						
CITY-ST-ZIP		·			CITY	-ST-ZIP						1

FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90239 028 ***150.00

THAT STATE

- -									
☐ CHECK HERE IF MAKING CH	ANGES								
4. FEI Number 65-0984695	Applied For Not Applicable								
	See Required								
7Name and Address of New Registered Agent									
,, ,	-								
O. Box Number is Not Acceptable)									
FL	Zip Code								
agent, or both, in the State of Florida. I am famil	iar with, and accept								
nen reinstating) DATE									
SATE									
9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees								
ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS IN 11								
	Change								
	Change Addition								
•									
The second secon	Change 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

SIGNATURE:

required

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