

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 16, 1999 8:00 am  
Secretary of State

04-16-1999 90016 040 \*\*\*150.00

DOCUMENT # S29269

1. Corporation Name  
J.N.H. SALES CO., INC.

Principal Place of Business

9158 CHIANTI COURT  
6630 SERENA LANE  
BOYNTON BCH FL 33437  
US

Mailing Address

2200 N FEDERAL HWY #8  
6630 SERENA LANE  
BOCA RATON FL 33431  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1991

4. FEI Number

65-0242641

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 2200 N. Federal Hwy

2a. Mailing Address

26 Same as 2

Suite/Apt. #, etc.

22 208

Suite, Apt. #, etc.

27

City & State

23 BOCA RATON, FL

City & State

28

Zip

24 33431

Country

25 U.S.A

Zip

29

Country

30

9. Name and Address of Current Registered Agent

HAYNES, NATHAN J  
9158 CHIANTI COURT  
BOYNTON BCH FL 33437

10. Name and Address of New Registered Agent

81 Name

Gerald Schaffer

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

2200 N. Federal Hwy Suite 208

83

84 City

Boca Raton

FL

85 Zip Code

33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/12/99

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE

NAME HAYNES, J. NATHAN  
STREET ADDRESS 9158 CHIANTI COURT  
CITY-ST-ZIP BOYNTON BEACH FL

TITLE D ☐ DELETE

NAME HAYNES, ALEDA S.  
STREET ADDRESS 9158 CHIANTI COURT  
CITY-ST-ZIP BOYNTON BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

Change Addition

Change Addition

Change Addition

Change Addition

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Change Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Date

Daytime Phone #

CR2E034 (1/98)

0336172