

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 20, 2002 8:00 am**  
**Secretary of State**

02-20-2002 90184 014 \*\*\*150.00

**DOCUMENT # F03846**

Entity Name  
**AMLA ENTERPRISES, INC.**

Principal Place of Business <b>901 SW 13TH ST          GAINESVILLE FL 32608</b>	Mailing Address <b>% B.S. PATEL          1901 SW 13TH STREET          GAINESVILLE FL 32608</b>
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DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address	4. FEI Number <b>59-2038352</b>	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
City & State	City & State		
Zip	Country	Zip	Country

<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
<b>PATEL, B.S. 1901 SW 13TH STREET GAINESVILLE FL 32608</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<b>FL</b> Zip Code	

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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1. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
FILE <input checked="" type="checkbox"/> <b>D</b> NAME <b>TUBB, GEORGE F.</b> STREET ADDRESS <b>2815 N.W. 13TH ST.</b> CITY-ST-ZIP <b>GAINESVILLE FL</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
FILE <input type="checkbox"/> <b>P</b> NAME <b>PATEL, B.S.</b> STREET ADDRESS <b>1901 SW 13TH STREET</b> CITY-ST-ZIP <b>GAINESVILLE FL</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
FILE <input type="checkbox"/> <b>D</b> NAME <b>PATEL, J S</b> STREET ADDRESS <b>1901 SW 13TH ST</b> CITY-ST-ZIP <b>GAINESVILLE, FL 00000</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
FILE <input type="checkbox"/> <b>D</b> NAME <b>RAVAL, D</b> STREET ADDRESS <b>1901 SW 13TH ST</b> CITY-ST-ZIP <b>GAINESVILLE, FL 00000</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
FILE <input type="checkbox"/> <b>VP</b> NAME <b>PATEL, P.S.</b> STREET ADDRESS <b>1901 SW 13TH ST.</b> CITY-ST-ZIP <b>GAINESVILLE FL</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
FILE <input type="checkbox"/>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: **SIGNATURE REQUIRED: PATEL, DIR.** **4/7/02 (352)376-2222**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)