2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L78025 1. Entity Name HUSSAIN & J.M. ENTERPRISE, INC. Principal Place of Business Mailing Address 18683 MARLIN RD. 18683 MARLIN RD. SW 107TH AVE. SW 107TH AVE. MIAMI FL 33157-6728 MIAMI FL 33157 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

Country

MOHAMMAD, SHAMIM

9. This corporation is eligible to satisfy its Intangible

PERRY, JENNIFER

18683 MARLIN RD

18683 MARLIN RD.

MIAMI FL

MIAMI FL

miami Fl

18683 MARLING ROAD

MOHAMMED, JEANETTE

MOHAMINAD, SHAMIM S

Tax filing requirement and elects to do so.

(See criteria on back)

11.

TITLE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

11954 SW 181 TER **MIAMI FL 33177**

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

Country

~~~ FILE NOW!!! FEE IS \$150.00

☐ Delete

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After MAY 1, 2000 Fee will be \$550.00

12.

TITLE

NAME

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NAME STREET ADDRESS

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CITY-ST-ZIP

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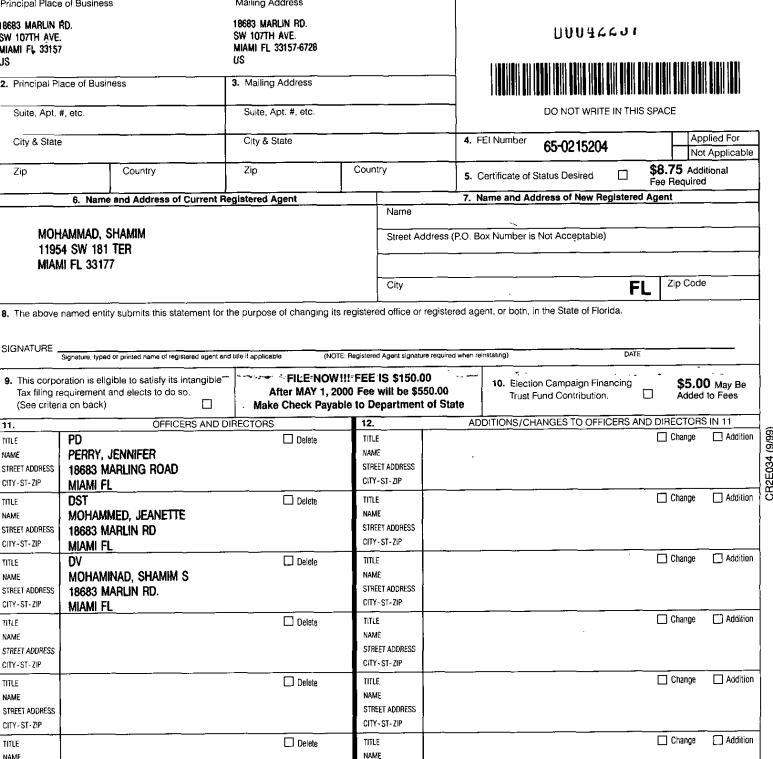
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## **FILED** May 01, 2000 8:00 am Secretary of State

05-01-2000 90431 029 \*\*\*150.00



13. Thereby 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 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 empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if with all other like

CITY-ST-ZIP

SIGNATURE:

Zip