

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

10fz

0045770 AV

DOCUMENT # P02000130486
1. Entity Name
 55 & 8, INC.



FILED

03 SEP 29 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
 2180 ALTON ROAD
 MIAMI BEACH FL 33140

Mailing Address
 2180 ALTON ROAD
 MIAMI BEACH FL 33140

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

CHECK HERE IF MAKING CHANGES **83**

4. FEI Number
 57-1149046

5. Certificate of Status Desired **\$8.75-Additional Fee Required**

6. Name and Address of Current Registered Agent
 FELDMAN, DAVID
 407 LINCOLN ROAD STE 701
 MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent
 Name: ASSAD ZACUR
 Street Address (P.O. Box Numbers Not Acceptable): 2180 ALTON RD.
 City: MIAMI BCH FL Zip Code: 33140

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Assad Zacur* DATE: 4-30-03

FILE NOW!!! FEE IS \$550.00
 After September 10, 2003 Fee will be \$750.00
 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE: D NAME: ZACUR, ASSAD STREET ADDRESS: 2180 ALTON ROAD CITY-ST-ZIP: MIAMI BEACH FL 33140	<input type="checkbox"/> Delete
TITLE: D NAME: ZACUR, IBTIHAJ STREET ADDRESS: 2180 ALTON ROAD CITY-ST-ZIP: MIAMI BEACH FL 33140	<input type="checkbox"/> Delete
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TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

200023420442
09/30/03--01034--017 **150.00

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: *Assad Zacur*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-03

CR2E034 (4/03)

10,
Dept. of State

Re-INSTANTMENT SECTION

DOC. # P02000130486
5528, INC.

Dear Sir,

Enclosed 2IBR along with
Check for \$150.00 as per your
instructions over the phone.

I didn't receive the
renewal form, it could be misplaced
in the mail or my Registered agent
die with heart attack and his law
office is closed.

Please help me ~~to~~ to update
my Corporation

Thank you kindly

Sincerely yours

Assad Zahir