2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P96 00000 70195 FII FI) 1. Fritity Name 00 SEP 15 AM 8:37 FLORIDA FALCON, INC SECPIETARY OF STATE ALLAHASSEE, FLORIDA 1782 N.J 169 Thuch Mailing Address Principal Place of Business FESTIVAL MALL # 4125 2900 W. SAMPLE ROAD NO. MIRMIBEREH, FL 33162 Pompano Bach, FL 33073 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number 65-0690221 City & State City & State Not Applicable \$8.75 Additional Country Zip . 5. Certificate of Status Desired Country Zip Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JAMIN AHMED TAMIL AHOED Street Address (P.O. Box Number is Not Acceptable) 1782 N.G. 169 Street No. Mian Beach, FL 33162 MIAMI 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. SIGNATURE Signature, upon or printed name of registr FILE NOW!! FEE 18:\$150.00 \$5.00 May Be 10. Election Campaign Financing 9. This corporation is eligible to satisfy its Intangible After MAY, 1, 2000 Fee avid by \$550,00. Make-Greek Payable to Uspertinish of State Added to Fees Trust Fund Contribution. Tax filing requirement and elects to do so. (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Addition Change TITLE ☐ Delete THE PSD JAMIL AHMED NAME 1782 N.E 169 Street NAME STREET ADDRESS STREET ADDRESS NO. Shimi Beach, Fl 3362 CITY-ST-ZIP CITY-ST-7IP 5000034195 DAddition ☐ Delete TITLE -10/10/00--01009--004 NAME NAME \*\*\*\*150.00 \*\*\*\*150.00 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7P Addition ☐ Change TITLE Delete TITLE NAME . NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Change Addition TITLE ☐ Delete 11111 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-S1-702 ☐ Addition Change TITLE ☐ Delete THE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST - 7IP Addition ☐ Change TITLE ☐ Defete 1011 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: \_\_

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FLORIDA FALCON, INC. 1782 N.E. 169<sup>th</sup> Street No. Miami Beach, FL 33162

September 12, 2000

Department of State Division of Corporations P.O.Box 6327 Tallahassee, FL 32314

Reg: Uniform Business Report, 2000

## Dear Sir/Madam:

Enclosed is the UBR 2000, for Florida Falcon, Inc., along with a check in the amount of \$150.00. Please note that due to change of address we were unable to receive the notice of renewal. We did file a change of address with the US Postal Service, however, we are continuously having problems in receiving the mail

Kindly accept this as timely filed. We thank you very much your assistance in this matter.

Sincerely,

Jamil Ahmed

President