

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 12, 2002 8:00 am**  
**Secretary of State**

03-12-2002 91003 012 \*\*\*150.00

0643419 SP

**DOCUMENT # P00000062480**  
 1. Entity Name  
**EASTCO IMPEX, INC.**

Principal Place of Business      Mailing Address  
**14011 SW 90TH AVE**      **14011 SW 90TH AVE**  
**APT D-203**      **APT D-203**  
**CORAL GABLES FL 33146**      **CORAL GABLES FL 33146**

2. Principal Place of Business      3. Mailing Address  
**14011 SW 90 AVE**      **14011 SW 90 AVE**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**APT # D-101**      **APT # D-101**

City & State      City & State  
**MIAMI FL**      **MIAMI FL**  
 Zip      Zip      Country      Country  
**33176-7135**      **33176-7135**

4. FEI Number      Applied For  
**65-1081582**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**ZYNE, PHILIP M**  
**C/O PHILIP M. ZYNE, P.A.**  
**1461 BLUE RD.**  
**CORAL GABLES FL 33146**

7. Name and Address of New Registered Agent  
 Name **BAWANY, MOHAMMED MUNAF**  
 Street Address (P.O. Box Number is Not Acceptable)  
**14011 SW 90 AVE**  
**APT # D-101**  
 City **MIAMI FL**      Zip Code **33176-7135**

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 **MOHAMMED MUNAF BAWANY DSVP**      DATE **28 FEB 2002**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD HABIB, MUHAMMAD HANIF 14011 SW 90TH AVE APT., D-203 MIAMI FL 33176-7135</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DSVP BAWANY, MOHAMMED MUNAF 14011 SW 90TH AVE APT., D-203 MIAMI FL 33176-7135</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD HABIB, MUHAMMAD HANIF 14011 SW 90 AVE, APT. D-101 MIAMI FL 33176-7135</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DSVP BAWANY, MOHAMMED MUNAF 14011 SW 90 AVE, APT. D-101 MIAMI FL 33176-7135</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **MOHAMMED MUNAF BAWANY**      DATE **28 FEB 2002**      DAYTIME PHONE # **(786) 897-1015**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFR2E034 (9/01)