FOR PROFIT CORPORATION 003

Mar 03, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P00000062480 03-03-2003 90950 023 ***150.00 1. Entity Name IMPEX. EASTCO DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 12637 SW <u>26TH STREET</u> 12637 SW 26TH STREET DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc 4. FEI Number Applied For City & State City & State 65-1081582 Not Applicable MIRAMAR MIRAMAR Country \$8.75 Additional Zip Country 5. Certificate of Status Desired_ Fee Required 33027-382 33027-382 7. Name and Address of Current Registered Agent BAWANY. MUNAF MOHAMMED DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 26TH STREET 37 SW IN THIS SPACE Zip Code *3*3027-MIRAMAR 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. BAWANY MOHAMMED SIGNATURE ture, typed or printed name of registered January 1'- May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. TITLE NAME NAME HABIB, MUHAMMAD HANIF STREET ADDRESS STREET ADDRESS 12637 SW 26TH STREET CITY-ST-ZIP CITY-ST-ZIP FL 33027- 3821 MIRAMAR TITLE TITLE DSVPSTATE OF THE PARTY NAME BAWANY, MOHAMMED MUNAF NAME STREET ADDRESS STREET ADDRESS 12637 SW 26TH STREET CITY-ST-7IP CITY-ST-ZIP - FL 33027-TITLE JITLE. NAME NAME STREET ADDRESS DO NOT WRITE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME

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 on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-7(P

NAME

STREET ADDRESS

CITY-ST-ZIP

MUNAF BAWANY

27 FFB 2003

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