

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90174 025 ***150.00

DOCUMENT # **1488565**

1. Entity Name

NASHEN, INC.

DO NOT WRITE IN THIS SPACE

11009776

2. Principal Place of Business

15032 NE 6th AVE

3. Mailing Address

18999 BISCAYNE BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#205

City & State

NORTH MIAMI, FL.

City & State

DAVENTURA, FL

4. FEI Number

65-0063803

Applied For

Not Applicable

Zip

33161

Country

USA

Zip

33180

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

JIVRAS, ALNASIR

Street Address (P.O. Box Number is Not Acceptable)

15032 NE 6th AVE

City

NORTH MIAMI

FL

Zip Code

33161

**DO NOT WRITE
IN THIS SPACE**

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

@ J. Masri

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

(NOTE: Registered Agent signature required when reinstating)

DATE

@ 4/21/03

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

**JIVRAS, ALNASIR
15032 NE 6th AVE
No. Miami, FL 33161**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**JIVRAS, ALNASIR
15032 NE 6th AVE
No. Miami, FL 33161**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**ST
JIVRAS, SHENOL
15032 NE 6th AVE
No. Miami, FL 33161**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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IN THIS SPACE**

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

SIGNATURE

@ J. Masri

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

@ 4/21/03

Date

305 945 0030

Phone #

CR2E034B (12/01)