2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State
02-26-2001 90538 038 ****61.25

0062912

DOCUMENT # 751481

1. Entity Name

JAMI ALL SELAM, INC.

Principal Place of Business	Mailing Address
225 N FT. HARRISON AVE CLEARWATER FL 33755 US	225 N FT. HARRISON AVE CLEARWATER FL 33755 US

814663

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2018523 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TZEKAS, RAIM 255 BAYSIDE DRIVE CLEARWATER BEACH FL 33767	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ABDULLAJ, NEIM 2100 MCKINLEY STREET CLEARWATER FL 33765	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GJELOSHI, ISMET 113 14TH STREET BELLEAIR BEACH FL 33756	☐ Delete	RAIM TZEKAS 255 BAYSIDE DR CLEARWATER FL 33767	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD IDRIZI, METAT 510 ISLAND WAY CLEARWATER FL 33767	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VINCA, SELIM 1450 MARJAHN AVENUE CLEARWATER FL 33756	☐ Delete	D BALLA, FARUDIN 1307 LAURA DR. CLEARWATER, FL 33755	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~VINCA, AFRIM~~ ~~1400 MEANDER LANE~~ ~~SAFETY HARBOR FL 34695~~	☐ Delete	D SHEMSHEDIN, MYNYR 1245 BLAIRRUSH DR. Tarpon Springs, FL 34687	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~MEVLUD~~ ~~MIT DRIVE~~ ~~FL 33763~~	☐ Delete	D DULE, VEIS 1259 BLU COURT PALM HARBOR, FL 34683	☒ Change ☐ Addition

CR2E037 (10/00)

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 617, 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: X ~~Metat Idrizi~~ REQUIRED X , 2001 727 442-0352
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR METAT IDRIZI Sec Date Daytime Phone #