

FILED
Jun 10, 2002 8:00 am
Secretary of State

05-21-2002 90892 011 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000000233

1. Entity Name:

SOMERSET EAGLE CORPORATION

DO NOT WRITE IN THIS SPACE

92239

2. Principal Place of Business

C/O NAPIC

3. Mailing Address

C/O NAPIC

Suite, Apt., etc.

399 Tequesta Dr., #101

P.O. Box #3659

DO NOT WRITE IN THIS SPACE

City & State

Tequesta, FL

City & State

Tequesta, FL

4. FEI Number

22-3079725

Applied For

Not Applicable

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

Zip

33469

Country

US

Zip

33469

Country

US

7. Name and Address of Current Registered Agent

Name

North American Property Inv Corp

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

399 Tequesta Drive, #101

City

Tequesta

FL

Zip Code
33469DO 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

David H. Gibbons

DAVID H. GIBBONS

PRESIDENT FOR N.A.P.I.C.

AS AGENT FOR

DATE

06-06-02

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 \$450.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25.
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	Saeed, Abdo Abdulla
STREET ADDRESS	Two Kings Mill Terrace
CITY-ST-ZIP	London, NW8 6AA England
TITLE	VSD
NAME	Saeed, Abdo Dirham
STREET ADDRESS	Two Kings Mill Terrace
CITY-ST-ZIP	London, NW8 6AA England
TITLE	TD
NAME	Saeed, Abdo Mohamed
STREET ADDRESS	Two Kings Mill Terrace
CITY-ST-ZIP	London, NW8 6AA England
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

DO NOT WRITE
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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dirham A. Saeed 04/25/02

Date

Date the Report is

CR200348 (12/01)