'200'3 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UN	IIFORM BUSINE	SS REPOR	r (UB	R)	Apı	• 30, 200	3 8:00	am
 Entity Nam 	MENT # NO20000 GENERAL TRUST USA INC	007910				cretary -30-2003 90128 (
Principal Place		Mailing Address 3057 NE 16TH AVENUE					~~	
DAKLAND PAR		OAKLAND PARK FL 33334]]	04937	19	
2. Principal Pl	lace of Business 7 NE 16 th AVE	3. Mailing Address	E16	H AV				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	DPA	Pix		HECK HERE IF MAKI	NG CHANGES	
City & State	FLORIDA	City & State				76010		plied For t Applicable
3 ^{zip} 33	34 Country AZA	33334	Country	4.2	5. Certificate of Sta	atus Desired	\$8.75 Add Fee Required	
	6. Name and Address of Current R	egistered Agent				ess of New Registers	d Agent	
SULTANA	, Shamima		<u> </u>		CTAMA	<u> </u>	MIM	A_
3057 NE 16TH AVENUE			Str	Street Address (P.O. Box Number is Not Acceptable)				
UAKLANL) PARK FL 33334		S Cit	V CAL	CLANDE		Zip Code	
The above	named entity submits this statement for	the surpose of abouting its	resistand of					334
	ons of registered agent.	the purpose of changing its	registered on	ice or register	ed agent, or both, in t			·
	0 th a-	Itll				15 KA	philds	ς Ι
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOT	E: Registered Agen	signature required	when reinstating)	DATI	· · · · · · · · · · · · · · · · · · ·	
FILE NOW: FEE IS \$61.25 9. Election Camp. Trust Fund Cor				sing	\$5.00 May Be Added to Fees		eck Payable artment of S	
10.	OFFICERS AND DIRE	ECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS IN	10
TILE	D CHARLEMAN MD CHARLOUR	□ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	ISLAM KHAN, MD. SHAFIQUL 27TH VALE ROAD, TUNBRIDG WE KENT TN 1 1BS U.K.	шѕ	NAME STREET ADD CITY-ST-ZII	J				}
TITLE	<u>D</u>	☐ Delete	TITLE				☐ Change	☐ Addition
AME AKTHER, NAZMA TREET ADDRESS 75 NORT MANIKDI BALUGHAT BAZR , DHAKA			NAME Street add	RF99				1
ITY-ST-ZIP CANTONMENT DHAKA BANGLADESH			CITY-ST-ZI					
TILE	D'	☐ Delete	TITLE				☐ Change	Addition
IAME STREET ADDRESS	ISLAM, NURUL PH.D. 196 GREEN ROAD		NAME STREET ADD	RESS				}
CITY-ST-ZIP	DHAKA 1205 BANGLADESH		CITY-ST-ZII	- 1				Ì
TILE	D.	☐ Delete	TITLE				☐ Change	Addition
NAME SULTANA, SHAMIMA			NAME STREET ADO	RESS				{
CITY-ST-ZIP	SM4 6JH UK		CITY-ST-ZII					
TLE	 	☐ Delete	TITLE				☐ Change	Addition
IAME STREET ADDRESS			NAME STREET ADD	PESS				
CITY-ST-ZIP			CITY-ST-ZI	1				1
TITLE		☐ Delete	TITLE				☐ Change	Addition
IAME TREET ADDRESS			NAME STREET ADD	BESS				ļ

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.

CITY-ST-ZIP

SIGNATURE:

SICHEDICISDAM SHAFIQULKHAN) ISTAMIOS