2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N44098

Name:

Address:

City-St-Zip:

3137 CARLOS DR

DUNEDIN, FL 34698

Entity Name: UNIVERSAL ACADEMY OF FLORIDA, INC.

Jun 09, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7320 EAST SLIGH AVE. 7320 EAST SLIGH AVE TAMPA, FL 33610 TAMPA, FL 33610 **Current Mailing Address: New Mailing Address:** 7320 EAST SLIGH AVE. TAMPA, FL 33610 FEI Number: 59-3119396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SALEH, IQBAL SALEH, IQBAL 6039 LÁKE MEADOWS 7517 TERRACE RIVER DR TAMPA, FL 33637 BROOKSVILLE, FL 34601 US 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: 06/09/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SALEH, M I DR SALEH, MOHAMAD I DR Name: Name: 4571 GOLF CLUB LANE Address: 7517 TERRACE RIVER DR Address: City-St-Zip: BROOKSVILLE, FL 34609 City-St-Zip: TAMPA, FL 33637 Title: () Delete Title: (X) Change () Addition Name: KASSEM, GAMAL Name: KASSEM, GAMAL Address: 635 RAPID FALLS DR Address: 635 RAPID FALLS DR City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33511 Title: () Delete Title: (X) Change () Addition NIMER, MAHMOUD Name: NIMER, MAHMOUD Name: 13359 BOLTON CT 13359 BOLTON CT Address: Address: City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: SPRING HILL, FL 34609 Title: () Delete Title: (X) Change () Addition Name: MAHMALJI, GHAIATH Name: MAHMALJI, GHIATH 14540 CORTEZ BLVD. 105 Address: Address: 14540 CORTEZ BLVD. 105 City-St-Zip: BROOKSVILLE, FL 34613 City-St-Zip: BROOKSVILLE, FL 34613 Title: () Delete Title: (X) Change () Addition VALIALLAH, ISMAIL HYE, HASSAN Name: Name: 11933 RIVERHILLS DR 7208 HAMMETT RD Address: Address: TAMPA, FL 33617 City-St-Zip: City-St-Zip: TAMPA, FL 33647 Title: () Delete Title: () Change () Addition HICKMAN, RAHMAN

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MOHAMAD IQBAL SALEH V 06/09/2002