

2002 UNIFORM BUSINESS REPORT (UBR)

0006787

DOCUMENT # N97000006394

1. Entity Name
ME BOUN FOUNDATION, INC.

FILED

02 OCT 17 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**3112 NORTH FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064**

Mailing Address
**3112 NORTH FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

4. FEI Number
65-0793613

Applied For
Not Applicable

Zip Country

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

**UNG, BORASMY N
3112 NORTH FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064**

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. I am familiar with, and accept the obligations of registered agent.

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

**After September 13, 2002,
min. will be \$236.25.**

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	D UNG, BORASMY N 3112 NORTH FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, G K 1600 S. RIVER VALLEY ROAD FLAGSTAFF AZ 86004	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHAN, KIM H 1021 DAWSON AVENUE LONG BEACH CA 90804	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100008453201 10/18/02--01059--025 **245.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **BORASMY UNG** **10/13/02 954-782-3271**

CR2E037 (4/02)



WORLD TILE & DECOR INC.

10 WEST FLETCHER ST
KISSIMMEE, FL 34741

(407)932-1444 Fax (407)932-0722

9/20/02

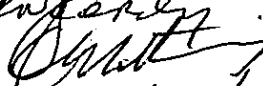
Ref: FEI - 59-3577961

TO WHOM IT MAY CONCERN:

PLEASE KNOW THAT I NEVER RECEIVED
THE UBR, TO THAT WOULD PERMIT ME TO FILE.

SINCE I NEVER RECEIVED IT, THE TIME
TO FILE HAS EXPIRED, AND I AM NOW ASSESSED
ADDITIONAL FEES.

PLEASE WAIVE THE FEES, SINCE I NEVER
RECEIVED THE UBR.

Sincerely,

PAUL MARTINIER