

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000004229

1. Entity Name -

STILL STANDING 2000, INC.

FILED

Jun 13, 2000 8:00 am
Secretary of State

06-13-2000 90001 045 ****61.25

Principal Place of Business

3600S. STATE ROAD 7
SUITE 302
MIRAMAR FL 33023

Mailing Address

3600S. STATE ROAD 7
SUITE 302
MIRAMAR FL 33023-5289

2. Principal Place of Business

3. Mailing Address

P.O. BOX 510101

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI FLORIDA

Zip

Country

Zip

Country

33151

USA

4. FEI Number

65-0934180

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JIHAD, ISMAIL

3600 S. STATE ROAD 7
SUITE 302
MIRAMAR FL 33023

Name

ISMAIL JIHAD

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

500 NE 26TH TER APT 3-A

City

MIAMI

FL

Zip Code

33137

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 D ☐ Delete
NAME BROWN, OGDEN
STREET ADDRESS 20002 NW 12TH COURT
CITY-ST-ZIP MIAMI FL 33169

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME ABDUL-RAHMAN, QAWI ESQ
STREET ADDRESS 11140 W GOLF DRIVE
CITY-ST-ZIP MIAMI FL 33167

TITLE ☒ Change ☐ Addition
NAME D/T RUTH BROWN
STREET ADDRESS RT 1 BOX 234
CITY-ST-ZIP MONTICELLO, FL 32344

TITLE D ☒ Delete
NAME SALIM, HASAN
STREET ADDRESS 4122 NW 11TH COURT
CITY-ST-ZIP MIAMI FL 33127

TITLE ☒ Change ☐ Addition
NAME D/S ADRIAL MILLS
STREET ADDRESS RT 1 BOX 234
CITY-ST-ZIP MONTICELLO, FL 32344

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME O/P ISMAIL JIHAD
STREET ADDRESS 500 NE 26TH TER APT 3-A
CITY-ST-ZIP MIAMI, FL 33137

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED

6-5-2000

Date

Daytime Phone #

CR2E037 (9/99)