

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
 05-13-2002 90058 028 ***150.00

DOCUMENT # P00000000096

1. Entity Name
WORLD ART GALLERIES, INC.

Principal Place of Business

**7715 SW 57TH AVENUE
 SUITE 1
 MIAMI FL 33143**

Mailing Address

**7715 SW 57TH AVENUE
 SUITE 1
 MIAMI FL 33143**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5880 SW 74th Ter.

Suite, Apt. #, etc.

8A

City & State

MIAMI FL

Zip

33143

Country

USA

3. Mailing Address

5880 SW 74th Ter. #8A

Suite, Apt. #, etc.

8A

City & State

MIAMI FL

Zip

33143

Country

USA

4. FEI Number

65-0967626

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**JACOBS, SAROSH G
 5880 SW 74 TERRACE #7B
 MIAMI FL 33143**

7. Name and Address of New Registered Agent

Name **Sarosh G. Jacob**

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

5880 SW 74th Terrace #8A

City **MIAMI**

FL

Zip Code

33143

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

Sarosh G. Jacob

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-14-02

DATE

**9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)**

☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

**10. Election Campaign Financing
 Trust Fund Contribution.**

☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **JACOB, SAROSH G**
 STREET ADDRESS **7715 SW 57TH AVENUE SUITE 1**
 CITY-ST-ZIP **MIAMI FL 33143**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP **change address ↑**

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sarosh G. Jacob
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-02
 Date

305-665-1999
 Daytime Phone #

CR2E034 (9/01)