

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P000000006489

1. Entity Name

Wymore Enterprises, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUN 27 PM 1:22

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

P.O. Box 1751

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1751

Suite, Apt. #, etc.

700021273257
07/02/03--01056--027 **450.00

DO NOT WRITE IN THIS SPACE

City & State

Apopka, FL

City & State

Apopka, FL 32704

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

32704

Country

Zip

32704

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JAMAL, Akber M.

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

3015 Windchime Cir W

City

Apopka

FL

Zip Code

32703

**DO NOT WRITE
IN THIS SPACE**

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

6-27-03

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

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. PSD OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JAMAL, Akber. M
3015 Windchime Cir W
Apopka, FL 32703

TITLE
NAME
STREET ADDRESS
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IN THIS SPACE**

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 on an attachment with an address, without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

6-27-03

CR2E034B (12/01)

6.27-03

To whom it may concern.

I did not receive any notices for the year 2003. (ASK of Orlando, Inc, Alysha Enterprises, Inc, Big K, Inc, Maitland Ave, Inc.)

I did not receive any notices for the year 2001, 2002, 2003, for Wynne Enterprises Inc

Al Jarama