

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State
 03-20-2001 90031 007 ***150.00

0177584

DOCUMENT # P00000007967

1. Entity Name
J A B DEVELOPMENT GROUP INC.

Principal Place of Business

**5891-B SUNSET DRIVE
 SOUTH MIAMI FL 33143**

Mailing Address

**5891-B SUNSET DRIVE
 SOUTH MIAMI FL 33143**

New address ↓

2. Principal Place of Business

14460 SW 96 AVE

3. Mailing Address

14460 SW 96 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33176

Country

USA

Zip

33176

Country

USA

4. FEI Number

651017966

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required.**

6. Name and Address of Current Registered Agent

**BERAHMAN, BEHROUZ
 14460 SW 96TH AVENUE
 MIAMI FL 33176**

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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 **FATHI, ASGJAR**
 STREET ADDRESS **5891-B SUNSET DRIVE**
 CITY-ST-ZIP **MIAMI FL 33143**

TITLE **D** ☐ Delete
 NAME **SHAHBAZIAN, JALLAL**
 STREET ADDRESS **12303 SOUTH DIXIE HIGHWAY**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE **D** ☐ Delete
 NAME **BERAHMAN, BEHROUZ**
 STREET ADDRESS **14460 SW 96TH AVENUE**
 CITY-ST-ZIP **MIAMI FL 33176**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 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

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

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TITLE ☐ Change ☐ Addition
 NAME
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 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 to an address with all the like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JALLAL SHAHBAZIAN **305-234-7589**

Date

Daytime Phone #

03.15.2001

CR2E034 (10/00)