

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

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90739 041 ***150.00

DOCUMENT # P00000022206

1. Entity Name

BING ENTERPRISES, INC.

DO NOT WRITE IN THIS SPACE

B0062060

2. Principal Place of Business

1025 CARTER ROAD

Suite, Apt. #, etc.

3. Mailing Address

1025 CARTER ROAD

Suite, Apt. #, etc.

City & State

WINTER GARDEN, FL

City & State

WINTER GARDEN, FL

4. FEI Number

59-362490

Applied For

Not Applicable

Zip

34787

Country

ORANGE

Zip

34787

Country

ORANGE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MOHAMMED, HASEEB

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

2412 LIELA LEE COURT

City

OCOE

FL

Zip Code

34761

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

Haseeb Mohammed

HASEEB MOHAMMED

3/28/02

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) ☐

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. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD MOHAMMED, HASEEB 2412 LIELA LEE COURT OCOE, FL 34761	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
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, with all other like empowered.

SIGNATURE: *Haseeb Mohammed* HASEEB MOHAMED

3/28/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)