

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

9/12/2003-90098-021-\$150.00-\$150.00

DOCUMENT # P00000022206

1. Entity Name  
**BING ENTERPRISES, INC.**



FILED

03 SEP 25 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>1025 CARTER RD.</b>		3. Mailing Address <b>1025 CARTER RD.</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>WINTER GARDEN FL</b>		City & State <b>WINTER GARDEN FL</b>	
Zip <b>34787</b>	Country	Zip <b>34787</b>	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-3629490</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

<b>DO NOT WRITE IN THIS SPACE</b>	7. Name and Address of Current Registered Agent	
	Name <b>Haseeb Mohammed</b>	
	Street Address (P.O. Box Number is Not Acceptable) <b>2412 Lela Lee Ct</b>	
	City <b>Ocoee</b>	FL Zip Code <b>34761</b>

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<p>January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State</p>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PRESIDENT MOHAMMED, HASEEB 2412 LEELA LEE CT. OCOEE FL 34787</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 607, Florida Statutes; and that my name appears in Block-10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Haseeb Mohammed** **HASEEB MOHAMMED** 9/10/03 407-383-6614

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)