

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State
 04-04-2001 90132 035 ***150.00

DOCUMENT # P00000024263

1. Entity Name
NAZZAL ENTERPRISES INC.

Principal Place of Business

**2203 LAKE BRADFORD RD.
 TALLAHASSEE FL 32316**

Mailing Address

**2203 LAKE BRADFORD RD.
 TALLAHASSEE FL 32316**

2. Principal Place of Business

2203 LAKE BRADFORD RD

3. Mailing Address

2203 LAKE BRADFORD RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TALLAHASSEE, FL

City & State

TALLAHASSEE, FL

4. FEI Number

593632816

Applied For

Not Applicable

Zip

32310

Country

LEON

Zip

32310

Country

LEON

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CANAS, JEANETTE
 3839 WIGGINTON RD.
 TALLAHASSEE FL 32303**

7. Name and Address of New Registered Agent

Name **ALI NAZZAL**

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

2203 LAKE BRADFORD RD

City

TALLAHASSEE

FL

Zip Code

32310

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 **ALI NAZZAL**

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

(NOTE: Registered Agent Signature required when reinstating)

1/31/01

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 **P** ☐ Delete
 NAME **NAZZAL, ALI**
 STREET ADDRESS **2203 LAKE BRADFORD RD.**
 CITY-ST-ZIP **TALLAHASSEE FL 32316**

TITLE **V** ☒ Delete
 NAME **NAZZAL, NUHAD**
 STREET ADDRESS **2203 LAKE BRADFORD RD.**
 CITY-ST-ZIP **TALLAHASSEE FL 32316**

TITLE **~~SECRETARY~~** ☐ Delete
 NAME **~~NUHAD NAZZAL~~**
 STREET ADDRESS
 CITY-ST-ZIP

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 **VICE PRESIDENT** ☒ Change ☐ Addition
 NAME **MOHAMED NAZZAL**
 STREET ADDRESS **2203 LAKE BRADFORD RD.**
 CITY-ST-ZIP **TALLAHASSEE, FL 32310**

TITLE **TREASURY** ☐ Change ☒ Addition
 NAME **NUHAD NAZZAL**
 STREET ADDRESS **2203 LAKE BRADFORD RD.**
 CITY-ST-ZIP **TALLAHASSEE, FL 32310**

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

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

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: **ALI NAZZAL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/01 850-575-9334

Date

Daytime Phone #

0460831

CR2E034 (10/00)