

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000029802

1. Entity Name

SHEFFIELD ENTERPRISES, INC.

**FILED**  
**Apr 11, 2001 8:00 am**  
**Secretary of State**

04-11-2001 90098 029 \*\*\*150.00

Principal Place of Business

700 NORTH WABASH AVENUE  
LAKELAND FL 33815

Mailing Address

700 NORTH WABASH AVENUE  
LAKELAND FL 33815

00034422

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

P.O. Box 1593

LAKE LAND, FL

33802

FLK



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3633335

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name MUHAMMAD MIR

Street Address (P.O. Box Number is Not Acceptable) ~~P.O. Box 1593~~

5115 N SOCRUM LOOP ROAD # 351

City LAKE LAND

FL

Zip Code 33809

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

*Muhammad Mir* (PRESIDENT)

04-06-01

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

(NOTE: Registered Agent signature required when re-registering)

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 PTD  
NAME ASIR MIR, MUHAMMAD  
STREET ADDRESS 700 NORTH WABASH AVENUE  
CITY-STATE-ZIP LAKELAND FL 33815 ☒ Delete

TITLE SVD  
NAME MIR, RIZWANA  
STREET ADDRESS 700 NORTH WABASH AVENUE  
CITY-STATE-ZIP LAKELAND FL 33815 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '01

TITLE PRESIDENT  
NAME MUHAMMAD NASIR MIR ☒ Change ☐ Addition

TITLE SVD  
NAME RIZWANA MIR ☒ Change ☐ Addition

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

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

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

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

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:

*Muhammad Mir* (MUHAMMAD MIR)

04-06-01

863-221-3231

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/00)