## FILED Jul 23, 2002 8:00 am FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR) Secretary of State** DOCUMENT # P00000036328 07-08-2002 90235 026 \*\*\*150.00 1. Entity Name MATADEEN ENTERPRISES 39321 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address Samo BII West Ocean Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ounton B City & State 4. FEI Numbe Applied For 65-0998249 Not Applicable Zip 3 3 4 2 6 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name Spiegel and utrera DO-NOT-WRITE Street Address (F.O. Box Number is Not Acceptable) IN THIS SPACE 343 Almeria Avenue Gables 6. 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. e of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150.00 This corporation is eligible to satisfy its Intangible **\$5.00** May Be After May 1, Fee is \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS President TITLE 🥇 🤋 KRISHUM MATADEEN NAME NAMÉ BII WEST OCERN AVE STREET, ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH CITY-SI-JIP ' Vice President TITLE TITLE, NAME1 ANGENIE MATADEEN NAME : STREET ADDRESS STREET ADORESS BU WEST OCEAN AVE CITY-ST-782 CRÝ-ST-ZIP BOYNTON BEACH FC 33426 mie TITLE NAME NAME STREET ADDRESS STREET ADORESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE NAME. IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP + πης NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP TITLE . nne NAME " NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP.

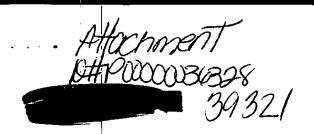
13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same 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:

ACCULTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/02 56/733 9459





7/1/02

Dear Sir Madam

please be advised that I did not receive a UBR form in the mail for this year. I called the \$50 488 9000 Number and Spoke to Lynn, I was told to Submit this letter Stating the Same and also to print and Complete the enclosed form with a cheque for \$150.00.

Please check that my mailing address is correct to the company stamp used above.

KeishNA MATADEEN.



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## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

July 11, 2002

MATADEEN ENTERPRISES, INC. 811 WEST OCEAN AVENUE BOYNTON BEACH, FL 33426

Subject: MATADEEN ENTERPRISES, INC.

Reference Number:

P00000036328

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

There is not a registered agent designated on the report. Please enter the current registered agent's name and Florida street address. If this is a change from the registered agent previously filed with this office, the new agent must sign accepting the designation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/rg ANNUAL REPORTS SECTION