

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

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90070 047 ***150.00

DOCUMENT # P00000039142
1. Entity Name DANYAL CORP ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>3288 STIRLING RD</u> Suite, Apt. #, etc.		3. Mailing Address <u>3288 STIRLING RD</u> Suite, Apt. #, etc.	
City & State <u>Hollywood FL</u>		City & State <u>Hollywood FL</u>	
Zip <u>33021</u>	Country <u>BRAZIL</u>	Zip <u>33021</u>	Country <u>BRAZIL</u>

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4. FEI Number <u>65-1001670</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 Syed Habbib DATE 4/10/02
(Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent signature required when reappointing))

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	<u>Pres</u> <u>Syed Habbib</u> <u>8690 SW 12th St DENVILLE</u> <u>FL 33021</u>
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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: Syed Habbib
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: 4/10/02 Daytime Phone: #

CR2E034B (12/01)