

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000058244**

1. Entity Name

CARAVAN INTERIORS, INC.**FILED**
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90313 040 ***150.00

0073859

Principal Place of Business

7712 DEBEAUBIEN DRIVE
ORLANDO FL 32835

Mailing Address

7712 DEBEAUBIEN DRIVE
ORLANDO FL 32835**CUU2486U**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-365 0527

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

CHOUFANI, RACHID
9103 CHARLES E. LIMPUS ROAD
ORLANDO FL 32836

7. Name and Address of New Registered Agent

Name

RAHIA ATA

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

7712 DEBEAUBIEN DR

City

ORLANDO**FL**

Zip Code

32835

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

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

(NOTE: Registered Agent signature required when reinstating)

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	ATA, RANIA	
STREET ADDRESS	7712 DEBEAUBIEN DRIVE	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input type="checkbox"/> Delete
NAME	ATA, OMAR	
STREET ADDRESS	7712 DEBEAUBIEN DRIVE	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHOUFANI, RACHID	
STREET ADDRESS	9103 CHARLES E. LIMPUS ROAD	
CITY-ST-ZIP	ORLANDO FL 32836	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHOUFANI, MARIANNE	
STREET ADDRESS	9103 CHARLES E. LIMPUS ROAD	
CITY-ST-ZIP	ORLANDO FL 32836	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Rania Ata*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rania Ata (President) 2/20/01 (407) 532-9898

Date

Daytime Phone #

CR2E034 (10/00)