

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

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90393 012 ***150.00

DOCUMENT # P 000-000-82-261

1. Entity Name

BLESSING USA INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4855, 1st AVE SOUTH

Suite, Apt. #, etc.

3. Mailing Address

4855, 1st AVE SOUTH

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ST. PETERSBURG, FL

City & State

ST. PETERSBURG, FL

4. FEI Number

59-366-7015

Applied For

Not Applicable

Zip

33711

Country

Zip

33711

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

DATU, HUSSAIN

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

4855, 1st AVE SOUTH

City

ST. PETERSBURG

FL

Zip Code

33711

**DO NOT WRITE
IN THIS SPACE**

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

05-21-02

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	PS
NAME	DATU, HUSSAIN
STREET ADDRESS	1832, MANATEE AVE EAST
CITY-ST-ZIP	BRADENTON, FL 334208
TITLE	VPT
NAME	REHAN, MOHAMMAD
STREET ADDRESS	1832, MANATEE AVE EAST
CITY-ST-ZIP	BRADENTON, FL 334208
TITLE	
NAME	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HUSSAIN DATU

Date

Daytime Phone #

05-21-02

CR2E034B (12/01)