

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 31, 2001 8:00 am**  
**Secretary of State**

05-01-2001 90018 011 \*\*\*150.00

0073272 AV

<b>DOCUMENT # P00000095157</b>			
1. Entity Name <b>HENA ENTERPRISES, INC.</b>			
Principal Place of Business <b>11380 PROSPERITY FARMS RD., SUITE 112 PALM BCH GARDENS FL 33410</b>		Mailing Address <b>11380 PROSPERITY FARMS RD., SUITE 112 PALM BCH GARDENS FL 33410</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>65-0603403</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			



DO NOT WRITE IN THIS SPACE

<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
<b>FAIRCLOUGH, MICHAEL J</b> <b>11380 PROSPERITY FARMS RD., SUITE 112</b> <b>PALM BCH GARDENS FL 33410</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City <b>FL</b> 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.  **FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HOSSAIN, MD MOSHARRAF</b> <b>4100 ILEX CT.</b> <b>PALM BCH GARDENS FL 33410</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D AKHTER, NAZMA</b> <b>4100 ILEX CT.</b> <b>PALM BCH GARDENS FL 33410</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:** M. G. Hossain **REQUIRED** MD-Mosharruf Hossain 7/25/01 848 9118  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)



*& Associates, Inc.*

Attachment # P0000095157  
10347

11380 Prosperity Farms Rd., Suite 112

Palm Beach Gardens, FL 33410

Phone (561) 691-1100

Fax (561) 626-3040

July 24, 2001

Division of Corporations  
P. O. Box 1500  
Tallahassee, FL 32302-1500

RE: Hena Enterprises, Inc.  
Document # P00000095157

To Whom It May Concern:

We received the attached notice and are responding to it.

Apparently the original report was received but sent back for corrections on May 11, 2001. We never received this correction letter.

Attached please find the fully executed 2001 Uniform Business Report. Per my telephone with Brian in your office there will not be any penalties assessed and the corporation will be in good standing.

Feel free to call me should you have any questions at (561) 691-1100.

Sincerely,

Maria M. Rodrigues  
Bookkeeper