

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 OCT -6 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000103194

1. Entity Name
SADAQA CONSULTING FIRM INC.



Principal Place of Business
352 NE 167 ST
B
MIAMI, FL 33162

Mailing Address
P.O. BOX 700731
MIAMI, FL 33170 US

2. Principal Place of Business
7860 SW 196 TERR
Suite, Apt. #, etc.

3. Mailing Address
P.O.
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
MIAMI, FL 33170
Zip
33170
Country
US

City & State
MIAMI, FL 33170
Zip
33170
Country
US

4. FEI Number
65-1058801

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

JEREZ, SAMIR G
P.O. BOX 700731
MIAMI, FL 33170

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
600023343106
09/25/03--01071--025 **\$61.25
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Samir G. Jerez*

9/22/03

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE PS
NAME JEREZ, SAMIR G
STREET ADDRESS 7860 SW 196 TERR
CITY-ST-ZIP MIAMI, FL 33189 ☐ Delete

TITLE VP
NAME PASCAL, ROBERT
STREET ADDRESS 430 SOUTH PARK RD., #303
CITY-ST-ZIP HOLLYWOOD, FL 33021 ☒ Delete

TITLE T
NAME JEREZ, FRANCES
STREET ADDRESS 19641 SW 103 CT
CITY-ST-ZIP MIAMI, FL 33167 ☐ Delete

TITLE AS
NAME JEREZ, AMINA L
STREET ADDRESS 14881 SW 167 ST.
CITY-ST-ZIP MIAMI, FL 33187 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *RECEIVED*
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE EXEC VP
NAME *BASSAM AT ABUGHAMDA, BASSAM*
STREET ADDRESS *8017 LAKE DR., #201*
CITY-ST-ZIP *MIAMI, FL 33166* ☒ Change ☐ Addition

TITLE JEREZ, FRANCES
NAME
STREET ADDRESS *7860 SW 196 TERR.*
CITY-ST-ZIP *MIAMI, FL 33189* ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/22/03

Date

305 944-2282

Daytime Phone #

CR2E034 (10/02)