## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 28, 2001 8:00 am DOCUMENT # P00000 //05 6 2 **Secretary of State** 03-28-2001 90005 030 \*\*\*150.00 NUR PETROLEUM, INC. Principal Place of Business Mailing Address 14290 W DINCHUY 14290 W. DIXICAHY 3. Mailing Address 8th Ave. 2. Principal Place of Business U0029271 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For Tallandale Not Applicable \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NUR JAHAN AMMED Street Address (P.O. Box Number is Not Acceptable) 30 S.W. 8th Averve Mallandyle, FC 33009 City 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1; 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PREvident ☐ Delete TITLE NUR Jahan Ahmed NAME NAME Rd #308-2 655 IVES DAMY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 23179 CITY-ST-ZIP Delete Change TITLE TITLE CARUK AHMED APT308-2 655 IVES DAINY RD APT308-2 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

FILED

Davtime Phone #