

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P00000110613

Entity Name
ZLESHAN ENTERPRISES, INC.



FILED
CLERK OF THE STATE
DIVISION OF CORPORATION
03 AUG 22 AM 10:18

Principal Place of Business
**266 WILSHIRE BLVD., STE. 127
CASSELBERRY FL 32707**

Mailing Address
**266 WILSHIRE BLVD., STE. 127
CASSELBERRY FL 32707**



2. Principal Place of Business

238 WILSHIRE BLVD

3. Mailing Address

238 WILSHIRE BLVD

Suite, Apt. #, etc.

STE 149

Suite, Apt. #, etc.

STE 149

City & State

CASSELBERRY FL

City & State

CASSELBERRY FL

Zip

32707

Country

Zip

32707

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

04-3693510

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FAZAL AKHTAR H

266 WILSHIRE BLVD., STE. 127

CASSELBERRY FL 32707

7. Name and Address of New Registered Agent

Name

FAZAL AKHTAR H

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

238 WILSHIRE BLVD STE 149

City

CASSELBERRY

FL

Zip Code

32707

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

AUGUST 13, 2003

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 ☐ Delete
NAME **CD**
STREET ADDRESS **FAZAL AKHTAR H**
CITY-ST-ZIP **266 WILSHIRE BLVD., STE. 127
CASSELBERRY FL 32707**

TITLE ☐ Delete
NAME **STD**
STREET ADDRESS **AKHTAR, NASREEN**
CITY-ST-ZIP **266 WILSHIRE BLVD., STE. 127
CASSELBERRY FL 32707**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **AKHTAR, AISHA**
CITY-ST-ZIP **266 WILSHIRE BLVD., STE. 127
CASSELBERRY FL 32707**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **AKHTAR, ZEESHAN**
CITY-ST-ZIP **266 WILSHIRE BLVD, SUITE 127
CASSELBERRY FL 32707**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **AKHTAR, FARHAN**
CITY-ST-ZIP **266 WILSHIRE BLVD, SUITE 127
CASSELBERRY FL 32707**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **CD**
STREET ADDRESS **FAZAL AKHTAR H**
CITY-ST-ZIP **238 WILSHIRE BLVD, SUITE 149
CASSELBERRY FL 32707**

TITLE ☒ Change ☐ Addition
NAME **STD**
STREET ADDRESS **AKHTAR, NASREEN**
CITY-ST-ZIP **238 WILSHIRE BLVD STE 149
CASSELBERRY FL 32707**

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **AKHTAR AISHA**
CITY-ST-ZIP **238 WILSHIRE BLVD, SUITE 149
CASSELBERRY FL 32707**

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **AKHTAR ZEESHAN**
CITY-ST-ZIP **238 WILSHIRE BLVD SUITE 149
CASSELBERRY FL 32707**

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **AKHTAR FARHAN**
CITY-ST-ZIP **238 WILSHIRE BLVD SUITE 149
CASSELBERRY FL 32707**

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

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AUGUST 13, 2003 407-2633-000

Date

Daytime Phone #

CR2E034 (4/03)