

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90063 004 ***158.75

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

DOCUMENT # P00000 116616

1. Entity Name

NATIONAL DISTRIBUTORS INC.

825297

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2301, E. McBERRY ST.

Suite, Apt. #, etc.

3. Mailing Address

2301, E. McBERRY ST.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TAMPA FL.

City & State

TAMPA

4. FEI Number

74-2983344

Applied For

Not Applicable

Zip

33610

Country

US

Zip

33610

Country

US

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

7. Name and Address of Current Registered Agent

Name AKBAR NOORANI

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

2301, E. McBERRY ST.

City TAMPA

FL

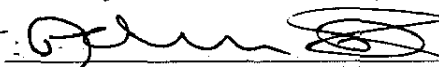
Zip Code

33610

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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



AKBAR NOORANI

02/14/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 P
NAME LAILA NOORANI
STREET ADDRESS 2301 E. McBERRY ST.
CITY-ST-ZIP TAMPA FL 33610

TITLE V
NAME AKBAR NOORANI
STREET ADDRESS 2301 E. McBERRY ST.
CITY-ST-ZIP TAMPA FL 33610

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:



AKBAR NOORANI

02/14/02

813-234-2244

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034B (12/01)