

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

FILED

DOCUMENT # PO-1000600271

1. Entity Name

Sand Flea Financial Corp.

02 MAY -7 AM 9:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1746 Thoroughbred

Suite, Apt. #, etc.

3. Mailing Address

1746 Thoroughbred

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Gotha, FL

City & State

Gotha, FL

4. FEI Number

59-3695216

Applied For

Not Applicable

Zip

34734

Country

USA

Zip

34734

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Nicolas Jabbour

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

1746 Thoroughbred Dr.

City

Gotha

**FL**

Zip Code

34734

**DO NOT WRITE  
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

Nicolas Jabbour President

4/25/02

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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
President  
Nicolas Jabbour  
1746 Thoroughbred Dr.  
Gotha, FL 34734

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**800005558478--5**  
**-05/20/02--01006--015**  
**\*\*\*\*\*300.00 \*\*\*\*\*300.00**

TITLE  
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Nicolas Jabbour

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

Date

407 460 6017

Daytime Phone #

CR2E034B (12/01)

Attachment # P01000 000 271

To Whom it May Concern,

I was informed by my accountant that my corporation had been dissolved last year due to me not filing an annual report last year. My former attorney who incorporated me neglected to forward me an application and I was never aware that I was to file such a thing.

enclosed is my payment from last year and this year and my updated UBR.

Sincerely,

Nicolas Jabbour

  
President of Sand Flea Financial Corporation

Questions give me a call 4074606017