

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90013 047 ***158.75

0113222 AT

DOCUMENT # P01000000523

1. Entity Name

JACOUB IMPORT & EXPORT INC.

Principal Place of Business

**1212 SOUTH BAY STREET
 EUSTIS FL 32726**

Mailing Address

**1212 SOUTH BAY STREET
 EUSTIS FL 32726**

C0073704



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3687182

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KHAIL, VIOLETTE

**1212 SOUTH BAY STREET
 EUSTIS FL 32726**

Name

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

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.

SIGNATURE

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)

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME **KHAIL, VIOLETTE**
 STREET ADDRESS **1212 SOUTH BAY STREET**
 CITY-ST-ZIP **EUSTIS FL 32726**

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

TITLE **VS** ☐ Delete
 NAME **HANNA, YACOUB**
 STREET ADDRESS **1212 SOUTH BAY STREET**
 CITY-ST-ZIP **EUSTIS FL 32726**

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 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)(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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/13/01 407 256 4736

Date

Daytime Phone #

CR2E034 (5/01)

07/13/01 ^{Attachment}

FROM: JACOB IMP. & EXP. ^{DOC # P0100000573}
Violette Khalil officer President ^{C0073704}

Please wave the 400.00 DOLLAR
late Fee I was not AWARE
that this was due.

because I corporated on
the 26 of December

and I did not receive the
First Notice so please

~~RE~~ Wave the Penality
officer president
Violette Khalil thank you
C. / C.