

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000001643

1. Entity Name
PAMA INC

Principal Place of Business
12501 NE 13TH AVE
NORTH MIAMI FL 33161

Mailing Address
12501 NE 13TH AVE
NORTH MIAMI FL 33161

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1067937

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GULAMALI, PARIN
12501 NE 13TH AVE
NORTH MIAMI FL 33161

7. Name and Address of New Registered Agent

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

TITLE D
NAME GULAMALI, PARIN
STREET ADDRESS 12501 NE 13TH AVE
CITY-ST-ZIP NORTH MIAMI FL 33161 ☐ Delete

TITLE D
NAME HEMANI, MAHMOOD
STREET ADDRESS 12501 NE 13TH AVE
CITY-ST-ZIP NORTH MIAMI FL 33161 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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: *Parin Gulamali* REQUIRED PARIN GULAMALI

FILED

01 SEP 12 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

0048800 AV

CR2E034 (5/01)

200004603522-4

09/21/01-0100-005

***150.00 ***150.00

Parin Gulamali

7/31/01

PAMA INC
12501 NE 13th AVE
NORTH MIAMI, FL 33161
PHONE: 305-949-9055

FLORIDA DIVISION OF CORPORATIONS
P.O. BOX 6327 TALLAHASSEE,
TALLAHASSEE, FL 32315

REF. NUMBER P01000001643

WE DID NOT RECEIVED THE REJECTED REPORT IN
MARCH, 2001. WE ARE ENCLOSING AGAIN OUR CHECK NO. 1029
DATED 07/31/2001 FOR \$150. PLEASE ACCEPT IT AS A TIMELY
FILING AND NOT IMPOSE A LATE FEE. WE ARE TRYING TO
REPORT ACCORDING TO YOUR AGENTS INSTRUCTIONS, AS PER
OUR TELEPHONE CONVERSATION ON 09/7/2001 & 8/18/2001.
& 7/31/2001.

SIGNED

R. L. L. L. L.
President/Dracoon