## 2002 UNIFORM BUSINESS REPORT (UBR)

## Aug 18, 2002 8:00 am Secretary of State P01000012440 DOCUMENT # 1. Entity Name 08-18-2002 90127 030 \*\*\*150.00 ABC GLASS & MIRROR, INC. Principal Place of Business Mailing Address 5805 NORTH 50TH ST., UNIT 23 & 24 5805 NORTH 50TH ST., UNIT 23 & 24 **TAMPA FL 33610** TAMPA FL 33610 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KALBANI, MERVAT Street Address (P.O. Box Number is Not Acceptable) 5805 NORTH 50TH ST., UNIT 23 & 24 **TAMPA FL 33610** City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (4/02)TITLE ☐ Delete TITLE KALBANI, MERVAT NAME NAME STREET ADDRESS 5805 NORTH 50TH ST., UNIT 23 & 24 STREET ADDRESS **TAMPA FL 33610** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition GOUL, KHALIL A NAME 5805 NORTH 50TH ST., UNIT 23 & 24 STREET ADDRESS STREET ADDRESS TAMPA FL 33610 CITY-ST-ZIP CITY-ST-ZIP. TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 record is true and accurate any 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 expressions 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 a

Affechment RROR, INC.

ABC GLASS & MIRROR, INC. 5805 N. 50<sup>TH</sup> ST. UNIT 23 Tampa, FL 33610

974793

Date: August 13, 2002

Florida Department of State Uniform Business Report Filings Division of Corporations P.O.Box 1500 Tallahassee, FL 32302-1500

Dear Sir/Madam:

This letter is in regards to our receipt of the 2nd notice for 2002 Uniform Business Report packet. We have not received the first notice, therefore; the payment was not made on time. Accordingly, we are requesting a waiver of charges for the 2nd notice. A check for \$150.00 is attached.

Your cooperation in this matter is greatly appreciated. For any further information please call me at 813-623-9999.

Sincerely,

Khalil Goul

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