

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

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90392 040 ***150.00

DOCUMENT # *P01000024711*

1. Entity Name

SAILANT INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4349-7 S. Semoran Blvd

3. Mailing Address

4349-7 S. Semoran Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Orlando FL

City & State

Orlando FL

4. FEI Number

59-3723764

Applied For

Not Applicable

Zip

32822

Country

Zip

32822

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *Dilia Corujo*

Street Address (P.O. Box Number is Not Acceptable)
4349-7 S. Semoran Blvd

City *Orlando*

FL

Zip Code

32822

**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

Dilia S. Corujo

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

(NOTE: Registered Agent signature required when resigning)

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 *PD*
NAME *DILIA CORUJO*
STREET ADDRESS *4349-7 S. Semoran Blvd, Orlando FL*
CITY-STATE-ZIP *32822*

TITLE *D.*
NAME *Mohamed Abdul Salem*
STREET ADDRESS *4349-7 S. Semoran Blvd, Orlando*
CITY-STATE-ZIP *32822*

TITLE *FL*
NAME *32822*
STREET ADDRESS *32822*
CITY-STATE-ZIP *32822*

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**DO NOT WRITE
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)(j), 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:

Dilia S. Corujo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/02

Date

407-273-7407

Daytime Phone #

CR2E034B (12/01)

Attached

June 03, 2002

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 3214-6327

Dear Sir/Madam:

Re: Salani, Inc.

Document #: P 01000024711

117759

This is to advise that we have not received our 2001 Uniform Business Report in the mail. Unfortunately, as a result, filing of this report was overlooked. We therefore, now enclose the UBR for the year 2002 along with the filing fee of \$150.00

We apologize for this error and request the abatement of any associated penalties. Your consideration is appreciated.

Sincerely

DL
Dilia Coruju
President