

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P01000033595**

1. Entity Name
H & N TRADING, INC

FILED

02 DEC -6 AM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

**5273 NW 161 STREET
HIALEAH, FL 33014-6221**

SAME

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1091992

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RASU MANIAR
7737 N. UNI. DR. #201
TAMARAC, FL 33321**

Name

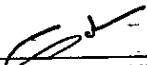
Street Address (P.O. Box Number is Not Acceptable)

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  DATE

Signature of the person or persons who are authorized to sign this statement on behalf of the entity.

(NOTE: Registered Agent's signature required when reinstating)

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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 (If 11)

TITLE PRESIDENT	<input type="checkbox"/> Delete
NAME MUHAMMED HASHIM	
STREET ADDRESS 5273 NW 161 STREET	
CITY-STATE-ZIP HIALEAH FL 33014	
TITLE VICE PRESIDENT	<input type="checkbox"/> Delete
NAME NASIR MUHAMMED HASHIM	
STREET ADDRESS 5273 NW 161 STREET	
CITY-STATE-ZIP MIAMI FL 33014	
TITLE SECRETARY	<input type="checkbox"/> Delete
NAME MUHAMMED SALEEM	
STREET ADDRESS 5273 NW 161 STREET	
CITY-STATE-ZIP HIALEAH FL 33014	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-STATE-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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

MUHAMMED SALEEM

12-02-02

Daytime Phone

Date: December 2, 2002

Florida Dept of State.

Dear Sir,

I am sending to you a form Uniform Business Report (UBR) for 2002.

I neither received the initial form nor received the late filing form during the year, and was only able to find about this when one of my supplier brought to my attention that the corporation was inactive.

In light of the above, I will appreciate if you will waive the penalties. Please send me the 2003 UBR at the mailing address shown on the attached report.

Thank you for your cooperation and understanding.

Sincerely,