## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## DOCUMENT #

P01000057970 1. Entity Name

RISING ENTERPRISES, INC.



## **FILED** Feb 24, 2003 8:00 am Secretary of State

02-24-2003 90164 039 \*\*\*150.00

					SO WE !	-					
2425 BROA	lace of Business DWAY # BEACH FL 33407	2425 BI	Mailing Address 2425 BROADWAY WEST PALM BEACH FL 33407					tuir <b>en</b> tri <b>aa</b> id	12. <b>4</b> (2) <b>2.144</b> 2 <b>4</b> 1 <b>0</b> 21		
Principal Place of Business     3. Mailing Address											
Suite, Ap	ot. #, etc.	Suite,	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & St	ate	City &	City & State			4.	4. FEI Number 65-1119688 Applied For				
Zip	Country	Zip		Countr	у	5.	Certificate of Status Desired		\$8.75 Ad	ot Applicable	
6. Name and Address of Current Registered Agent						7	Name and Address of New I	lamintara	•		
FAIRCLOUGH, MICHAEL J 11380 PROSPERITY FARMS ROAD STE 112 PALM BEACH GARDENS FL 33410					Name Na2n Street Addr HID	na F	AKH-eC Box Number is Not Acceptable		Agent		
8. The abov	e named entity submits this statemen	t for the purpos	e of changing its	registered	City   Y	n Bo	gent, or both, in the State of Fig	FL	Zip Cod 33	410	
SIGNATURE	NAZMA AKELON	•			agent signature re		,		9-03		
Afte	FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.0 k Payable to Florida Department	0 ' ]			2.4.5		9. Election Campaign Fir Trust Fund Contribution		\$5.0 Added	O May Be I to Fees	
10.	OFFICERS AN	ID DIRECTORS		11.	<del>-</del>	ΔΓ	DUTIONS/CHANGES TO OFF	0500 110			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AKHTER, NAZMA 2425 BROADWAY WEST PALM BEACH FL 33407	<u> </u>	☐ Delete	TITLE NAME	ADDRESS 1- ZIP	AL	ODITIONS/CHANGES TO OFF	CERS ANI	D DIRECTOR: ☐ Change	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZZAMAN, MEHANNAD-A YA 2425 BROADWAY WEST PALM BEACH FL 33407	UHAM	Delete MAO	TITLE NAME STREET	ADDRESS			÷_	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAHMUDAKHTER, KHAN 2425 BROADWAY WEST PALM BEACH FL 33407		☐ Delete	TITLE NAME STREET /	ADDRESS - Zip				Change	Addition	
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ITLE IAME TREET ADDRESS ITY-ST-ZIP			☐ Delete	TITLE NAME STREET AI CITY-ST-	- 1				☐ Change	Addition	
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MAZMATLANGHEROUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR