SEP. 27. 2002 3:13PM NO. 774 P. 3/3

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000081373

Entity Name

ALLSTATE CONSTRUCTION & MANAGEMENT COMPANY, INC.

FILED

02 OCT -1 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200008083682--6
-09/30/02--01001--002
****315.00 ****150.00

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

| Principal Place of Business | 3. Mailing Address |
|---|---|
| P.O.BOX 432565 | P.O.BOX 432565 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: MIAMI FL 33243 | City & State: MIAMI FL 33243 |
| Zip / Country | Zip / Country |

4. FEI Number — [x] Applied For [ ] Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name: MIKE AJABSHIR

Street Address (P.O. Box Number is Not Acceptable): 7840 NW 72 AVE

City: MIAMI FL Zip Code: 33166

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: M. Ajabshir M.AJABSHIR/RG 09/27/2002

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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 $580.00
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

OFFICERS AND DIRECTORS

| | | | |
|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>ORFANI, MOHAMMAD<br>17891 S.DIXIE HWY<br>MIAMI FL 33157 | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>AJABSHIR, SOROOREH<br>17891 S.DIXIE HWY<br>MIAMI FL 33157 | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | |
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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 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: MOHAMMAD ORFANI/D 09/27/02 305-218-8585

1CR 10/1/02

CR2E034B (12/01)

**September 28, 2002**

**Department of State**
**Division of Corporations**
**P. O. Box 6327**
**Tallahassee, FL 32314**
**C/O Loria Poole**

**RE: ALLSTATE CONSTRUCTION AND MANAGEMENT COMPANY, INC.**
**2002 Uniform Business Report**

**Dear Mrs. Poole,**

**Please be advised as of today September 28, 2002 I never received any form or notification for the above reference to filing the report, from the Department for 2002 Uniform Business Report.**

**Please accept this letter as my filing report for the above mentioned corporation and include this filing. See attached $150.00 for filing. Allstate Construction and Management Company, Inc.**

**If you have any questions do not hesitate to call me at (305) 971-2000.**

**Sincerely,**

**M. Ajabshir/VP**