2002 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 05, 2002 8:00 am Secretary of State P01000088100 DOCUMENT # 1. Entity Name 08-05-2002 90008 042 ***150.00 SALIMA CORP. Mailing Address Principal Place of Business 1574 NE 205TH ST 972707 1574 NE 205TH ST **MIAMI FL 33179** MIAMI FL 33179 3. Mailing Address 2. Principal Place of Business -DO NOT-WRITE-IN-THIS-SPACE Suite, Apt. #, etc. Applied For 4. FEI Numbe City & State City & State Not Applicable \$8.75 Additional Country 7in Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR Zip Code MIAMI FL 33145 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00-May-Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE ☐ Delete TITLE **PSTD** NAME NAME KHAN, SAMIR STREET ADDRESS 1574 NE 205TH ST STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33179** CITY - ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 if changed, or on an attachment with an address, with all other like empowered.

Attachment
912700 07-20-02

Florida Department of State Division of Corporation Tallahassee, Florida

Re: Salima-Corp.
Doc.# P01000088100
FEI# 65-1137460

This letter is concerning the Division of Corporation filing fees I have received. This is the first letter I have received from the state department stating that my filing fees are \$550. I spoke to a representative of the department explaining that this is my first year of business and I had never received any letter prior to this notice, and I was advised to pay the filing fees of \$150 along with a letter of explanation.

Thank you

Samir Khan

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