Dayone Propo #

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

02 MAY 20 AM 9: 14 DOCUMENT # P01000094519 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Entity Name WWW.INDOPAKOROCERYONLINE.COM,INC- Tarik Computer Consulting, Inc. DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address SAME 3917 Kenas Street Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For .ake Park. Fi 65-1146776 Not Applicable Country 33403 \$8.75 Additional Palm Beach Certificate of Status Desired Fec Required-7. Name and Address of Current Registered Agent Name Tarig Iqbal DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 3917 Kenas Street Zio Code __133403 ₋ake Park 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. (TARIQ IQBAL) 4-15-02 at techniques agent and the il applicable (MOTE: Registered Agent signature required when reinstatrigt January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Amended UBR is \$61.25 Fax filling requirement and efects to do so. 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS DILE President / Director шц CR2E034B (12/01) NAME Tariq Iqbal STREET ACCRESS STREET ADDRESS 3917 Kenas Street Lake Park, Fl. 33403 CITY - ST-ZIP CITY - ST- ZIP TITLE . MILE NAME STREET ADDRESS STRUET ADDRESS CITY-ST-2IP CITY-ST-ZIP TITLE iiir' NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE CITY-ST- AP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 1m.e THLE NAME. HALAE STREET ADDRESS STREET ADDRESS CITY-ST-ZI CITY-ST-ZIP TITLE TITLE NAU, 1E NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 13. Thoseby certify that the information supplied with this filling 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 ackiness, with all other like dypowered. 4-15-02 561-624-7743 SIGNATURE: TARIQ (QBAL) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR