

4/2/02

FILED

May 21, 2002 8:00 am  
Secretary of State

04-02-2002 90111 047 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000105153

1. Entity Name  
USA ON TIME CONSTRUCTION, INC.Principal Place of Business  
10531 RUNNING OAK CT  
JACKSONVILLE FL 32246Mailing Address  
P O BOX 16952  
JACKSONVILLE FL 32245-6952

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5367 River Forest Dr. Suite, Apt. #, etc. Jacksonville, FL City & State		3. Mailing Address Suite, Apt. #, etc. City & State Zip 32211 Country USA		4. FEI Number 58-3754974	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			

6. Name and Address of Current Registered Agent AZIMI, SINA 10531 RUNNING OAK CT JACKSONVILLE FL 32246		7. Name and Address of New Registered Agent Name: Masoud Dehlavi Street Address (P.O. Box Number is Not Acceptable) 5367 River Forest Dr City: Jacksonville, FL Zip Code: 32211	
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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: <i>S. Azimi</i> <i>Masoud Dehlavi</i> Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)		DATE: 4/24/02	
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9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AZIMI, SINA 10531 RUNNING OAK CT JACKSONVILLE FL 32246 <i>delete</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10761 Ironstone Dr Jacksonville, FL 32246 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEHLAVI, MASOUD 10425 GREEN HAVEN DR JACKSONVILLE FL 32246 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5367 RIVER FOREST DR JACKSONVILLE, FL 32211 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEHLAVI, MANSOUR 10531 RUNNING OAK CT JACKSONVILLE FL 32246 <i>delete</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Masoud Dehlavi* *Masoud Dehlavi* President 4/24/02  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

#745-6327