


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

FILED
Jul 07, 2003 8:00 am
Secretary of State

07-07-2003 90136 041 ***150.00

DOCUMENT # P01000109149(L)

1. Entity Name
E+N of LAKE MARY FL. INC



DO NOT WRITE IN THIS SPACE

90140601

2. Principal Place of Business
801 International Pkwy.
Suite, Apt. #, etc.

3. Mailing Address
630 Queensbridge
Suite, Apt. #, etc.

City & State
Lake Mary FL

City & State
Lake Mary FL

Zip
32746

Country
USA

Zip
32746

Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3758950

Applied For
☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Nadia KAYAL

Street Address (P.O. Box Number is Not Acceptable)
630 Queensbridge Dr

City
Lake Mary FL

Zip Code
32746

**DO NOT WRITE
IN THIS SPACE**

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 Nadia KAYAL Nadia Kayal 5-3-03

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

DATE

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Nadia Kayal</u> <u>630 Queensbridge Dr</u> <u>Lake Mary FL 32746</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>630 Queensbridge Dr</u> <u>Lake Mary FL 32746</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Lake Mary FL 32746</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Vice President</u> <u>630 Queensbridge Dr</u> <u>Lake Mary FL 32746</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>EVA Kayal</u> <u>Same address.</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Nadia Kayal Nadia Kayal 5-3-03 4073577706

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034B (12/02)