

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**  
05-01-2003 90815 016 \*\*\*150.00

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DOCUMENT # P02000000648

1. Entity Name  
NAZNIN ENTERPRISES, INC.



Principal Place of Business  
4907 CARDER RD. UNIT 4  
ORLANDO FL 32810

Mailing Address  
4907 CARDER RD. UNIT 4  
ORLANDO FL 32810



2. Principal Place of Business  
3500 SOUTH NOVA RD

3. Mailing Address  
113 ALEATHA DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
PORT ORANGE FL

City & State  
DAYTONA BEACH FL

4. FEI Number  
30-0019646

Applied For  
Not Applicable

Zip  
32129

Country  
U.S.A.

Zip  
32114

Country  
U.S.A.

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22 ST., 4TH FL  
MIAMI FL 33145

Name  
ARIFUR PATWARY  
Street Address (P.O. Box Number is Not Acceptable)  
113 ALEATHA DR

City  
DAYTONA BEACH FL Zip Code  
32114

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 *Arifur R. Patwary* X ARIFUR R. PATWARY.

4/29/03

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPST  
PATWARY, MOHAMMED S  
4907 CARDER RD, UNIT 4  
ORLANDO FL 32810 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PIT  
PATWARY MOHAMMED S  
4907 CARDER RD #4  
ORLANDO FL 32810 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PATWARY ARIFUR  
113 ALEATHA DR  
DAYTONA BEACH FL 32114 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V/P SEC  
PATWARY ARIFUR  
113 ALEATHA DR  
DAYTONA BEACH FL 32114 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP  
☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP  
☐ Delete

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CITY-ST-ZIP  
☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Arifur R. Patwary* X ARIFUR R. PATWARY 04-29-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)