2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P02000052821 **DOCUMENT #**

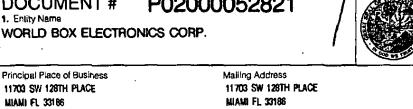
2. Principal Place of Business

SALEHI, DARYOUSH

Suite, Apt. #, etc.

City & State

SIGNATURE .



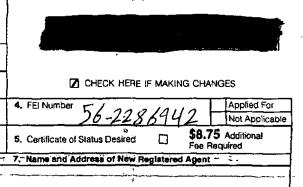
3. Mailing Address

Suite, Apt. #, etc.

Aug 04, 2003 8:00 am Secretary of State 7/21

07-21-2003 90131 048 ***150.00

55053132



11703 SW 128TH PLACE MIAMI FL 33186 Zip Code ţ

Country

8.	The above named entity submits this statement	t for the purpose of changing its registered office or re	gistered agent, or both, in the State of Florida.	I am familiar with, and accept
	the obligations of registered agent.			
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FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00

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

Country

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when re-estating) 9. Election Campaign Financing

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

\$5.00 May Be Added to Fees

Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 TITLE ☐ Delete TITLE Change ☐ Addition SALEHI, DARYOUSH NAME NAME **CR2E034** STREET ADDRESS 11703 SW 128TH PLACE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33186 CITY-ST-7IP TITLE Celete . TITLE Change ☐ Addition SALEHI, ARSALAN NAME NAME STREET ADDRESS STREET ADDRESS 11703 SW 128TH PLACE CITY-ST-ZIP MIAMI FL 33188 CITY-ST-ZIF TITLE TITLE -☐ Change Addition MALE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Deleta ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE : ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP

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 shell 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 Specuso 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, win 97 of the time provered.

SIGNATURE:

SIGNAT REQUIRED SIGNATURE AND DOSED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>305/4708988</u>

Attachment

World Box Electronics Corp 4320 NW 72 AVE Miami, Fl 33166 PH# 305-470-8988 FEI# 56-2286942 55053/32 ρ0200050821

To Whom It May Concern:

As I received the UB Report there was a charge of \$550 on my account. After I spoke to one of your representative, she recommended me that I should attach an explanation letter to the form and send them again. This is the first year of my business and I was not familiar with this kind of charges. Please waive this charge from my account and let me know if you need any more information.

Sincerely,

Daryosh Salehi

Date: 07/31/2003-