


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90823 033 \*\*\*150.00

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<b>DOCUMENT #</b> P02000081256	
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1. Entity Name  
**NADER HACK, INC.**

Principal Place of Business  
**505 WEKIVA SPRINGS ROAD  
SUITE800  
LONGWOOD FL 32779**

Mailing Address  
**505 WEKIVA SPRINGS ROAD  
SUITE800  
LONGWOOD FL 32779**



2. Principal Place of Business  
**320 W. Sabal Palm Place**

3. Mailing Address  
**320 W. Sabal Palm Place**

Suite, Apt. #, etc.  
**Suite 300**

Suite, Apt. #, etc.  
**Suite 300**

City & State

**Longwood, Florida 32779**

City & State

**Longwood, Florida 32779**

Zip

**32779**

Country

Zip

**32779**

Country

4. FEI Number

**75-3074248**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**KEIDAISH, PHILIP F JR  
505 WEKIVA SPRINGS ROAD, SUITE 800  
LONGWOOD FL 32779**

7. Name and Address of New Registered Agent

Name  
**Philip F. Keidaish, Jr.**

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

**320 W. Sabal Palm Place, Suite 300**

City

**Longwood,**

**FL**

Zip Code  
**32779**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HACK, NADER</b>	
STREET ADDRESS	<b>505 WEKIVA SPRINGS ROAD SUITE 800</b>	
CITY-ST-ZIP	<b>LONGWOOD FL 32779</b>	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Hack, Nader</b>	
STREET ADDRESS	<b>320 W. Sabal Palm Place #300</b>	
CITY-ST-ZIP	<b>Longwood, Florida 32779</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Nader Hack**  
**PRESIDENT**

**4/25/03**

**407-448-8400**

Date

Daytime Phone #

CR2E034 (10/02)