

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2003 8:00 am
Secretary of State

0276622 AV

DOCUMENT # P02000123958

1. Entity Name
MY SABA'S INC.



05-13-2003 90131 001 ***150.00
05-13-2003 90131 002 ***150.00

Principal Place of Business
1031 NORTH MIAMI BEACH BOULEVARD
NORTH MIAMI BEACH FL 33162

Mailing Address
1031 NORTH MIAMI BEACH BOULEVARD
NORTH MIAMI BEACH FL 33162



2. Principal Place of Business
16119 BISCAYNE BLVD
Suite, Apt. #, etc.

3. Mailing Address
21411 NE 19 AVE
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
No. MIAMI
Zip
33160
Country
U.S.

City & State
No. MIAMI BEACH, FL
Zip
33179
Country
U.S.

4. FEI Number
42-1560575
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SLAVIN, MARK B
1031 NORTH MIAMI BEACH BOULEVARD
NORTH MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent
Name
NAHUM FRENKEL
Street Address (P.O. Box Number is Not Acceptable)
21411 NE 19 AVE
City
No. MIAMI BEACH, FL
Zip Code
33179

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 *Naum Frenkel* DATE 1-21-03
(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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
D FRENKEL, NAHUM 1031 NORTH MIAMI BEACH BOULEVARD NORTH MIAMI BEACH FL 33162	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
FRENKEL, NAHUM 21411 NE 19 AVE No. MIAMI BEACH, FL 33179	
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"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> 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: *Naum Frenkel* DATE 1-21-03 305 944-1400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/02)