

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

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

05-01-2003 90828 018 \*\*\*150.00

DOCUMENT # P02000133148

1. Entity Name

Ophelia's Inc.



**DO NOT WRITE IN THIS SPACE**

90119082

2. Principal Place of Business

5200 NW 31st Avenue

Suite, Apt. #, etc.

Suite A-6

City & State

FORT LAUDERDALE, FL

Zip

33309

Country

USA

3. Mailing Address

5200 NW 31st Avenue

Suite, Apt. #, etc.

Suite A-6

City & State

FORT LAUDERDALE, FL

Zip

33309

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Syed Mehdi

5200 NW 31st Avenue

Suite A-6

Fort Lauderdale, FL

FL

Zip Code

33309

**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

Syed Mehdi

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

(NOTE: Registered Agent signature required when reinstating)

03-24-03

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  
President  
Syed Mehdi  
9200 W. Atlantic Blvd # 1417  
Coral Springs, FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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: Syed Mehdi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-24-03

Date

Daytime Phone #

954/564-0900

CR2E034B (12/02)