

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151012

Entity Name: UNITED H.B. INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

18130 N.W. 2 AVENUE  
MIAMI, FL 33169 US

## New Principal Place of Business:

## Current Mailing Address:

18130 N.W. 2 AVENUE  
MIAMI, FL 33169 US

## New Mailing Address:

FEI Number: 20-1835785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BHUIYAN, MONIR H  
18130 N.W. 2 AVENUE  
MIAMI, FL 33169 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP,D ( ) Delete  
Name: BHUIYAN, MONIR H  
Address: 16384 N W 16 STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: P,D ( ) Delete  
Name: MOSTAFA, GOLAM  
Address: 1650 N.E. 135 STREET APT 501  
City-St-Zip: N. MIAMI, FL 33181 US

Title: S,D ( ) Delete  
Name: UDDIN, CHOROAR  
Address: 1650 NE. 135 STREET APT 501  
City-St-Zip: N. MIAMI, FL 33181 US

Title: T,D ( ) Delete  
Name: RAZZAK, MOHAMMED A  
Address: 999 N.E. 167 STREET APT 410  
City-St-Zip: N. MIAMI BEACH, FL 33162 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GOLAM MOSTAFA

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date