2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P19066 DOCUMENT#

FILED Jan 27, 2003 8:00 am Secretary of State

1. Entity Name JASPER CORP.							01-27-2003	90531 01	5 ***150	.00
Principal Plac 530 BEACON STE 900 BIRMINGHAM	PARKWAY WI		Mailing Address 530 BEACON PARKWAY WEST STE 900 BIRMINGHAM AL 35209							
2. Principal P	Place of Busin	ness	3. Mailing Address			7		B DIA BIBIL BIBI		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Stat	te	-	City & State			4. FEI Number 51-0308719				oplied For ot Applicable
Zip Country			Zip	Zip Country		5. Ce	ertificate of Status Desired		8.75 Add	
6. Name and Address of Current			egistered Agent			7. Name and Address of New Registered Agent				
			يه جهدي الله	-	Name -			-		
		SERVICES, INC.		Street Address (P.O. Box Number is Not Acceptable)						
9200 SOUTH DADELAND BLVD. SUITE 508								····		
MIAMI FL	33156-0000				City			FL	Zip Code	e
	named entity tions of regist		the purpose of changi	ng its registere	ed office or registe	ered agen	t, or both, in the State of Flor	ida. I am fa	miliar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicable.	(NOTE: Registered	d Agent signature require	ed when reins	stating)	DATE		
After	r May 1, 200	! FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of	State	-			Election Campaign Fina Trust Fund Contribution	~ —		O May Be
10.		OFFICERS AND I	DIRECTORS	11.		ADDI	ITIONS/CHANGES TO OFFI	CERS AND	DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	530 BEAC	Walter F. On Parkway West S' Am Al 35209	□ Delete	NAME STREE					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		LIAM B. On Parkway West S' Am Al 35209	Delete						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LONG, WII 530 BEAC		□ Delete				7		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		· I				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		à. P	□ Delete		1	•			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition

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 life empowered.

SIGNATURE: