9/8/2003-90128-022-\$550.00-\$550.00

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

<u> </u>						
1. Entity Nam		0004561	03 SEP 19 PM12: 43		1	
,				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
500 SOUTH 3	ce of Business RD ST. E BEACH FL 32250	Mailing Address 500 SOUTH 3RD ST. JACKSONVILLE BEACH FL. US	32250			
2. Principal		3. Mailing Address	<del></del>		aniii Milii Milii Bilat Hilb Al	10) (14) (51)
Solic, ALGRE ING. 9, 1 L OZ/40		s PO Box 950459 Lake Mary, FL 3		CHECK HERE IF MAKING CHANGES		
City & S		6		4. FEI Number 59-3155875		plied For t Applicable
Zip		2	<u> </u>	5. Certificate of Status Desired	S8.75 Addi	
	6. Name and Address of Current	Registered Agent		- 7 Name and Address of New Ro	gistered Agent.	
DADADI C	·4070		Name			}
DARABI, F			Ctroot Ad	James Cook	¥	
500 SOUTH 3RD STREET JACKSONVILLE BEACH FL 32250				26 Evansdale Rd 46 ake Mary, FL 327	-	
			City	•	p Code	,——
B. 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	Sibrigue's, typed or printed parts of registered agent	and title if applicable. / JAOTE:	AMES C Registered Agent signisture requ	200K C60 ired when reinstating)	9-16-6	1003
	FILE NOW!!! FEE IS \$550.00					
After Se	ptember 10, 2003 Fee will be \$750 k Payable to Florida Department o			9. Election Campaign Fina Trust Fund Contribution		May Be to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS	
TITLE	PD Darabi, Farzin	☐ Delete	TITLE	Chief Executive Officer	☐ Change	Addition &
NAME STREET ADORESS	63 BEACH AVE		NAME STREET ADDRESS	James Cook		200
CITY-ST-ZIP	ATLANTIC BCH. FL		CITY-ST-ZIP	326 Evansdale Rd 46		ָּעַ (
TITLE	STD	☐ Delete	TITLE	Lake Mary, FL 327	Change	Addition C
NAME	PARTOW, RAMIN	•	NAME.			
STREET ADDRESS CITY-ST-ZIP	335 ELEVENTH ST. ATLANTIC BCH. FL	·	STREET ADDRESS CITY-ST-ZIP		<del></del>	
TITLE		Delota	NAME		Change ·	Addition
STREET ADDRESS		•	STREET ADDRESS			- }
CITY-ST-ZIP	<del>                                   </del>	☐ Defete	CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME		L Derete	NAME		C3 Orange	
STREET ADDRESS	,		STREET ADORESS			[
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,		CITY-ST-ZIP	<u> </u>		
TETLE NAME		☐ Delete	TITLE NAME		Change	☐ Addition
STREET ADDRESS	·		STREET ADORESS			<b>\</b>
CITY-ST-ZIP	; 		CITY-ST-ZIP			}
HILE		☐ Delete	TITLE	<del></del>	Change	Addition
name Street address			NAME STREET ADDRESS			}
CITY-ST-ZIP			CITY-ST-ZIP			
12. I hereby of indicated of the cor	certify that the information supplied with I on this report or supplier ential report is portation or the receiver of rustee emp	this filing does not qualify for to true and accurate and that my owered to execute files report	the exemption stated in vignature shall have the required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I e same legal effect as if made under or 07, Florida Statutes; and that my name	further certify that the inf ath; that I am an officer of appears in Block 10 or I	formation or director Block 11 if
	100 0 0 450 N	10 F 4300 IIII 21	En	2/14/03		{
SIGNAT	UME:		الكيان جعنا	71'1/		

n 9/19