

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000046869

1. Entity Name  
Z. ENVER CORP.

Principal Place of Business  
2001 N.E. 6TH ST.  
POMPANO BEACH FL 33060

Mailing Address  
2001 N.E. 6TH ST.  
POMPANO BEACH FL 33060

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

Zip Country Zip Country

#### 6. Name and Address of Current Registered Agent

BERMAN & FELDMAN, ATTYS AT LAW  
2424 N.E. 22ND ST.  
POMPANO BEACH FL 33062

4. FEI Number 65-0503302 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional  
Fee Required

#### 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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.

SIGNATURE \_\_\_\_\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

#### 11. OFFICERS AND DIRECTORS

TITLE DP  
NAME ZAHID, SAMINA  
STREET ADDRESS 4414 N.W. 4TH AVE.  
CITY-ST-ZIP POMPANO BEACH FL 33064

Delete

TITLE DS  
NAME ENVER, ZAHID S  
STREET ADDRESS 4414 N.W. 4TH AVE.  
CITY-ST-ZIP POMPANO BEACH FL 33064

Delete

TITLE DV  
NAME SHEIKH, MUSHTAQ A  
STREET ADDRESS 3151 N.E. 12TH TERRACE  
CITY-ST-ZIP POMPANO BEACH FL 33064

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

#### 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Zahid Samina Enver*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/02

954-941-9768

Daytime Phone #

0169420  
AV

CR2E034 /9/01