

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Amended

AMENDED

FILED

03 JUL 25 PM 4: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

DOCUMENT # P94000072848					
1. Entity Name BARA UNIVERSAL, INC.					
Principal Place of Business 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819			Mailing Address 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3273035	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KHATIB, RASHID A 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)</small>					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PSD	<input type="checkbox"/> Delete	TITLE	DPST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHATIB, RASHID A		NAME	Khatib, Rashid A	
STREET ADDRESS	5728 MAJOR BLVD SUITE 601		STREET ADDRESS	5728 Major Blvd, Ste 601 Orlando, FL 32819	
CITY-ST-ZIP	ORLANDO, FL 32819		CITY-ST-ZIP		
TITLE	CTD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MAALI, JESSE I		NAME	Zahi W. Khouri	
STREET ADDRESS	7582 W. SAND LAKE RD		STREET ADDRESS	5728 Major Blvd, Ste 601 Orlando, FL 32819	
CITY-ST-ZIP	ORLANDO, FL 32819		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PORTLOCK, DAVID		NAME	Randall Hodge	
STREET ADDRESS	8282 OAKLAND PLACE		STREET ADDRESS	5728 Major Blvd, Ste 601 Orlando, FL 32819	
CITY-ST-ZIP	ORLANDO, FL 32819		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>RANDALL R HODGE</u> V.P. 7/24/03 407-354-2200					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (10/02)