2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR)								FILED				
DOCUMENT # P94000092471							Feb 05, 2002 8:00 am Secretary of State					
1. Entity Name GEORGE NASSAR CORPORATION								02-05-2002 900	•			
Principal Place of Business Mailing Address 9931 - 56TH STREET NORTH PINELLAS PARK FL 34666 PINELLAS PARK FL 34666												
2 Principal S	Place of Business		3. Mailing Address									
Suite, Apt. #, etc. Suite, Apt. #, etc.						<i>N</i> ,		DO NOT WRITE	IN THIS SPA	/CE		
City & Stat			City & State Seminole	FL			4. FEI	Number 59-3292614			plied For t Applicable	
Zip 3377	7-7_ Count		Zip 3377 て	Cour	ntry			rtificate of Status Desired	□ Fe	3.75 Add e Required		
	6. Name and Ad	dress of Current Re	gistered Agent		Name		7. Na	me and Address of New Reg	istered Age	ent		
	TH ST. NORTH	,			f	ddress (P	P.O. Box	Number is Not Acceptable)				
PINELLAS	PARK FL 34666				City				FL	Zip Code)	
8. The above	named entity submits	s this statement for th	ne purpose of changing i	ts register	ed office or	registere	ed agen	t, or both, in the State of Floric				
. ' SIGNATURE	Signature, typed or printed n	ame of registered agent and	title if applicable, (NO	OTE: Registere	VS- nd Agent signatu	re required v	when reinst	lating)	1/0	<u>+</u>		
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 After May 1, 2002 Fee will Make Check Payable to Depa						50.00		10. Election Campaign Finan- Trust Fund Contribution.	cing		May Be to Fees	
11.		OFFICERS AND DI		12.			ADDI	TIONS/CHANGES TO OFFICE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT NASSAR, GEORG 19931 56TH ST. NO PINELLAS PARK F	ORTH	☐ Delete					- George Kumquat Lane	<i>ک</i>	3 Change	Addition {	
TITLE	VS	L 34000	☐ Delete	TITL		V S	عمر	note FL 3.	37 7 ∑ 8	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	NASSAR, TINA L 9931 56TH ST. NO PINELLAS PARK F				IE EET ADDRESS -ST-ZIP	NO	455 533	An TINA Kumquat La Ide FL 33	ne N			
TITLE NAME	PINELLAS PARK F	L 34000	_ □ Delete □	JITLI NAM	E	<u>se</u>	<u>M ir</u>	1816 LE 33] Change	Addition	
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TITLE NAME			☐ Delete	TITLE] Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - ST- ZIP			·				
indicated of the cor	on this report or support poration or the receive	ilemental report is tru er or trustee empowe	ie and accurate and that	: my signa rt as requi	ture shall ha	ave the sa	ame lea	9.07(3)(i), Florida Statutes. I fu al effect as if made under oatl Statutes; and that my name a	h: that I am	an officer	or director	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(727)5471079