2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000093228

1/28/00-90196-021-\$150.00-\$150.00

FILED

1. Entity Name DANISH ENTERPRISES, INC. 00 MAR -3 PM 3:49 Principal Place of Business Mailing Address SECRETARY OF STATE 3951 STERLING ROAD 3951 STERLING ROAD TALLAHASSEE, FLORIDA FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312-6217 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0626098 Not Applicable \$8.75 Additional Zip Country Country П Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WAHEED, ABDUL Street Address ~ ~3951-STERLING ROAD -FORT LAUDERDALE FL 33312 Zip Code City 8. The above named entity submits this statement for the purgose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW III FEE IS \$150.00. 10.-Election Campaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 Trust Fund Contribution. Added to Fees П (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 VSD Addition Addition ☐ Delete TITLE ☐ Change TITLE MHD. BASSAM TUMEH NAME NAME 3951 STERLING ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP noilibbA 🔲 ☐ Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CJTY-ST-ZIP CITY-ST-ZIP Addition Change Delete DITE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Oclete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 anothal 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 expowered to execute the 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 expowered. 00

SIGNATURE

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