

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Jan 25, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P96000055615**1. Entity Name  
J.M.K. OF PALM BEACH COUNTY, INC.

Principal Place of Business	Mailing Address
402 406 14TH ST	402 406 14TH ST
MIAMI BCH FL 33139 US	MIAMI BCH FL 33139 US

2. Principal Place of Business 3. Mailing Address

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

City &amp; State City &amp; State

Zip Country Zip Country

4. FEI Number  
**65-0676807**  
Applied For  
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

JAHANGIR MOHAMMED  
6961 ABBOTT AVE  
#7  
MIAMI BEACH FL  
33141

## 7. Name and Address of New Registered Agent

Name  
HOSSAIN MOHAMMED J  
Street Address (P.O. Box Number is Not Acceptable)  
6961 ABBOTT AVE  
#7  
City MIAMI BEACH FL Zip Code 33141

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 **MOHAMMED J. HOSSAIN****01/25/2001**

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, 2001 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 S ☐ Delete  
NAME MAMUN MOHAMMED A  
STREET ADDRESS 3782 MILRUN CT  
CITY-ST-ZIP GREENACRES FL 33463TITLE D ☒ Delete  
NAME JAHANGIR MOHAMMED  
STREET ADDRESS 6961 ABBOTT AVE #7  
CITY-ST-ZIP MIAMI BEACH FL 33141TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE VP ☒ Change ☐ Addition  
NAME MAMUN MOHAMMED A  
STREET ADDRESS 965 MANOR DR. #23-A  
CITY-ST-ZIP PALMSPRINGS FL 33464TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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: **MOHAMMED JAHANGIR**

P

01/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

**MOHAMMED J. HOSSAIN**  
**6961 ABBOTT AVE.#7**

**MIAMI BEACH, FL33141**